### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 1 of 74

Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)	<u></u>		
Case number (if known)	Chapter you are filing under:		
	✓ Chapter 7		
	Chapter 11		
	Chapter 12		Check if this is an
	Chapter 13		amended filing

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name	Antonio	
	First name	First name
Write the name that is on your government-issued	L	
picture identification (for	Middle name	Middle name
example, your driver's	St Hilaire	
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
. All other names you		
have used in the last	First name	First name
8 years		
Include your married or	Middle name	Middle name
maiden names.		
	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
Only the last 4 digits of your Social	XXX - XX- 4446	
Security number or federal Individual	OR	OR
Taxpayer Identification number	9 xx - xx-	9 xx - xx-
(ITIN)		

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 2 of 74

Debtor 1 Antonio First Name	L St Hilaire Middle Name Last Name	Case number (if known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
Identification Numbers (EIN) you have used in the last	Business name	Business name
8 years	Business name	Business name
Include trade names and doing business as names	EIN	EIN
	EIN	EIN
5. Where you live	800 Brook Dr Apt 4	If Debtor 2 lives at a different address:
	Number Street	Number Street
	Streamwood Illinois 60107 City State Zip Code	City State Zip Code
	Cook County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	City State Zip Code	City State Zip Code
6. Why you are choosing this district	Check one:	Check one:
to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. §§ 140	08.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)
		_
		_

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 3 of 74

Debtor 1 Antonio		L	St Hilaire		Case number (if kno	wn)
First Name		Middle Nam				
Part 2: Tell the	Court Abo	ut Your Bankrup	tcy Case			
7. The chapter Bankruptcy are choosing under	Code you		brief description of eac B2010)). Also, go to the			C. § 342(b) for Individuals Filing for opriate box.
8. How you will fee	pay the	more details a cashier's chemay pay with  I need to pay Individuals to I request that judge may, but the official poyou choose the	about how you may pack, or money order. If a credit card or check the fee in installment of Pay Your Filing Fee to the fee be waived (but is not required to, woverty line that applies	ay. Typically, if yo your attorney is so with a pre-printe of the present of the	ou are paying the submitting your led address. this option, sig official Form 103 this option only d may do so onling and you are u	the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney an and attach the <i>Application for AA</i> ).  If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official
9. Have you file bankruptcy last 8 years?	within the	✓ No.  Yes. District  District		When When When	MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY	Case number  Case number  Case number
10. Are any bank cases pendit being filed by spouse who filing this cas you, or by a k partner, or b affiliate?	ng or y a is not se with ousiness	✓ No.  Yes. Debtor District Debtor District		When When	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11. Do you rent residence?	your	✓ No.	landlord obtained an e	t About an Eviction		st You (Form 101A) and file it with

### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 4 of 74

St Hilaire Debtor 1 Antonio Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have Ⅵ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 5 of 74

St Hilaire Debtor 1 Antonio Case number (if known)

First Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. Disability. My physical disability causes me to My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 6 of 74

Debtor 1 Antonio First Name		lilaire Case num	ber (if known)	
	estions for Reporting Purposes	· ····································		
16. What kind of debts do you have?	16a. Are your debts primarily co "incurred by an individual pri No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primarily bu	imarily for a personal, family, on the second sime of the second sime of the second se	ts are debts that you incurred to obtain ion of the business or investment.	
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fund No.		xempt property is excluded and administrativounsecured creditors?	'e
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000	
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	ion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 bil	
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	ion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion	
Part 7: Sign Below	I have examined this petition, and	I declare under penalty of peri	jury that the information provided is true a	and
For you	correct.  If I have chosen to file under Chap of title 11, United States Code. I u under Chapter 7.  If no attorney represents me and I out this document, I have obtained I request relief in accordance with I understand making a false staten connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 157	oter 7, I am aware that I may prinderstand the relief available of did not pay or agree to pay so did and read the notice required the chapter of title 11, United nent, concealing property, or de can result in fines up to \$25 19, and 3571.	roceed, if eligible, under Chapter 7, 11,12, under each chapter, and I choose to procedure.	, or 13 eed e fill
	/s/ Antonio St Hilaire Signature of Debtor 1	Sig	gnature of Debtor 2	
	Executed on 3/20/2018 MM / DD / Y	E	xecuted on	

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 7 of 74

Debtor 1 Antonio	L	St Hilaire	Case number	(if known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 12, or 13	3 of title 11, Unit	I have informed the debtor(s) about ted States Code, and have explained the I also certify that I have delivered to the
If you are not	debtor(s) the notice requ	uired by 11 U.S.C. § 342(b)	and, in a case ir	which § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge afte	er an inquiry that the inform	ation in the sch	edules filed with the petition is incorrect.
attorney, you do not	4.5	-		·
need to file this page.	/s/ Corey A. Walters	S	Date	3/20/2018
	Signature of Attorney	for Debtor		MM / DD / YYYY
	Corey A. Walters			
	Printed name			
	Semrad Law Firm			
	Firm name			
	10 N. Martingale Roa	d		
	Street			
	Suite 400			
	Schaumburg	Illino	ois	60173
	City	Stat	е	Zip Code
	Contact phone		_ Email address	cwalters@semradlaw.com
			Illino	
	Bar number		Stat	e

### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 8 of 74

Fill in this information to identify your case:								
Debtor 1	Antonio	L	St Hilaire					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States E	sankruptcy Court for the:	Northern	District of Illinois					
			(State)					
Case number (If known)								

П	Check if this is an
	amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$6,132.50
1b. Copy line 62, Total personal property, from Schedule A/B	#0.100.50
1c. Copy line 63, Total of all property on Schedule A/B.	\$6,132.50
art 2: Summarize Your Liabilities	
	<b>Your liabilities</b> Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	<b>#00.074.00</b>
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$22,971.00
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$72,073.00
Your total liabilities	\$95,044.00

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 9 of 74

Deb	tor 1 Antonio	L	St Hilaire	Case number (if known)	
	First Name	Middle Name	Last Name		
Part	4: Answer These Qu	uestions for Administrati	ive and Statistical Records		
6. <b>A</b>	re you filing for bankrup	tcy under Chapters 7, 11, or	13?		
Г	No. You have nothing	to report on this part of the for	rm. Check this box and submit th	is form to the court with your other so	chedules.
_ L	Yes.			•	
Ľ	<u>v</u>				
7. <b>W</b>	/hat kind of debt do you	have?			
E			mer debts are those incurred by a	n individual primarily for a personal,	
_				Ç	
		imarily consumer debts. Yo vith your other schedules.	u have nothing to report on this p	part of the form. Check this box and so	ubmit
		<i>our Current Monthly Income</i> , Form 122B Line 11; <b>OR</b> , Fo	e: Copy your total current monthly rm 122C-1 Line 14.	y income from Official	\$3,036.99
9.	Copy the following spec	ial categories of claims fro	m Part 4, line 6 of Schedule E/F	<b>=</b> :	
	From Bort 4 on Schodul	e E/F, copy the following:	Total claim		
	From Fart 4 on Schedul	e E/F, copy the following.		Total Clailli	
	9a. Domestic support obl	igations (Copy line 6a.)		\$0.00	
	Oh Tayon and portain oth	er debts you owe the governn	nont (Copy line 6h.)	\$0.00	
	90. Taxes and certain our	er debts you owe the governing	Terri. (Copy line ob.)	<u> </u>	
	9c. Claims for death or pe	ersonal injury while you were ir	ntoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy	line 6f.)		\$52,135.00	
	9e. Obligations arising ou	t of a separation agreement or	r divorce that you did not report a	s \$0.00	
	priority claims. (Copy line 6g.)		, ,		
	9f Debts to pension or n	rofit-sharing plans, and other s	similar debts (Copy line 6h.)	\$0.00	
	on Bobio to ponsion or p	ioni onaing plans, and other	Similar dobto. (dopy into on.)		

\$52,135.00

9g. Total. Add lines 9a through 9f.

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 10 of 74

Fill in this	information	n to identify your c	ase:							
Debtor 1	Anto		L		St Hilaire					
Debtor 2	First	Name	Middle N	lame	Last Name					
(Spouse, if fi	ling) First	Name	Middle N	lame	Last Name					
United Sta	ates Bankruj	otcy Court for the:	Northern		District of Illinois					
Case num	nber				(State)					
` '	al Form	106A/B							Check if this is an amended filing	
Sche	dule A	/B: Prope	erty						12/1	
category v responsibl write your	where you follow the for supplement of the formula in the following the	think it fits best. I ying correct infor case number (if k	Be as complete a mation. If more s known). Answer e	nd ac pace very o	asset only once. If an asset fi curate as possible. If two man is needed, attach a separate question. r Other Real Estate You O	ried peop sheet to	ple are this fo	e filing together, both a rm. On the top of any a	are equally	
	<b>own or ha</b> No. Go to		quitable interest i	in any	residence, building, land, or	similar pr	ropert	y?		
1.1	Yes. Where is the property?  Street address, if available, or other description			What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building				Do not deduct secured claims or exemptions. Poster the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property.		
					Condominium or cooperative Manufactured or mobile home			Current value of the entire property?	Current value of the portion you own?	
	Number	Street State	ate Zip Code		Land Investment property Timeshare Other			Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.		
				one	b has an interest in the proper . Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a		k	Check if this is co (see instructions)	ommunity property	
				ш	er information you wish to ad		his ite	m, such as local		
					perty identification number:			,		
1.2		e more than one, li			at is the property? Check all the Single-family home Duplex or multi-unit building Condominium or cooperative	at apply.		the amount of any secu	claims or exemptions. Put ired claims on <i>Schedule D:</i> nims Secured by Property. Current value of the portion you own?	
				ш	Manufactured or mobile home Land					
	Number	Street	7in Codo	Ħ	Investment property Timeshare Other			Describe the nature of interest (such as fee sthe entireties, or a life	simple, tenancy by	
	City	State	Zip Code	Who one	o has an interest in the prope	another		(see instructions)	ommunity property	

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 11 of 74

Debtor 1	Antonio First Name	L Middle Name	St Hilaire Last Name	Case numbe	r (if known)	
1.3 Stre	et address, if available, or ot		What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	apply.	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own?
Nun	nber Street State	Zip Code	Land Investment property Timeshare Other		Describe the nature of interest (such as fee sthe entireties, or a life	imple, tenancy by
			Who has an interest in the propert Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ar Other information you wish to add	nother	(see instructions)	mmunity property
	the dollar value of the po ve attached for Part 1. Wi	rtion you own for rite that number h	all of your entries from Part 1, includere.	uding any entrie	s for pages	
Do you ow you own th 3. Cars, va	hat someone else drives. If yours, trucks, tractors, sport ut	equitable interes you lease a vehicle,	t in any vehicles, whether they are also report it on Schedule G: Executo cycles	-	-	
3.1	s Make Model: Year:	Ford Taurus 2004	Who has an interest in the proone.  Debtor 1 only	perty? Check	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.
	Approximate mileage: Other information: 2004 Ford Taurus		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors at Check if this is community		Current value of the entire property? \$1200.00	Current value of the portion you own? \$1200.00
3.2	Make Model: Year:	Volkswagen Jetta 2013	who has an interest in the proone. Debtor 1 only	perty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Approximate mileage:  Other information: 2013 Volkswagen Jetta		Debtor 2 only Debtor 1 and Debtor 2 only  At least one of the debtors and	nd another	Current value of the entire property? \$5675.00	Current value of the portion you own? \$2837.50
			Check if this is community	property (see		

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 12 of 74

btor 1	Antonio	L	St Hilaire	Case number	er (if known)		
	First Name	Middle Name	Last Name				
3.3	Make		Who has an interest in the	property? Check		claims or exemptions. Pu	
	Model:		one.		•	red claims on <i>Schedule i</i> aims Secured by Property	
	Year: Approximate mileage:		Debtor 1 only		Oreanors who have or	ums decured by moperty.	
	Approximate inileage.		Debtor 2 only		Current value of the	Current value of the	
	Other information:		Debtor 1 and Debtor 2 or	nly	entire property?	portion you own?	
			At least one of the debtor	s and another	<del></del>		
			Check if this is commun	nity property (see			
			instructions)				
3.4	Make		Who has an interest in the	property? Check		claims or exemptions. Pu	
	Model:		one.			cured claims on Schedule D:	
	Year:		Debtor 1 only		Creditors vvno Have Cia	aims Secured by Property	
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the	
	Other information:		Debtor 1 and Debtor 2 or	nly	entire property?	portion you own?	
			At least one of the debtor	s and another			
			Check if this is commun	nity property (see			
				.,			
	mples: Boats, trailers, motor No		instructions) ther recreational vehicles, other aft, fishing vessels, snowmobiles, i				
Exa	mples: Boats, trailers, motor No Yes Make Model:		who has an interest in the	motorcycle accessor	Do not deduct secured the amount of any secu	claims or exemptions. Pu	
Exa	mples: Boats, trailers, motor No Yes Make Model: Year:		who has an interest in the one.  Debtor 1 only	motorcycle accessor	Do not deduct secured the amount of any secu	•	
Exa	mples: Boats, trailers, motor No Yes Make Model:		who has an interest in the	motorcycle accessor	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule in ims Secured by Property.  Current value of the	
Exa	mples: Boats, trailers, motor No Yes Make Model: Year:		who has an interest in the one.  Debtor 1 only	motorcycle accessor property? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule I lims Secured by Property	
Exa	mples: Boats, trailers, motors No Yes  Make Model: Year: Approximate mileage:		who has an interest in the one.  Debtor 1 only Debtor 2 only	motorcycle accessor property? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule in ims Secured by Property.  Current value of the	
Exa	mples: Boats, trailers, motors No Yes  Make Model: Year: Approximate mileage:		who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 2 or	motorcycle accessor  property? Check  hly s and another	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule in ims Secured by Property.  Current value of the	
4.1	mples: Boats, trailers, motors No Yes  Make Model: Year: Approximate mileage:		who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communication.	property? Check  bly s and another  hity property (see	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule in ims Secured by Property.  Current value of the	
4.1	mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:		who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor instructions)	property? Check  bly s and another  hity property (see	Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property?  Do not deduct secured the amount of any secu	red claims on Schedule a claims Secured by Property.  Current value of the portion you own?  claims or exemptions. Pured claims on Schedule a claims on cl	
4.1	mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year:		who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor instructions)  Who has an interest in the one.	property? Check  bly s and another  hity property (see	Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property?  Do not deduct secured the amount of any secu	red claims on Schedule and secured by Property.  Current value of the portion you own?  claims or exemptions. Pure secured by Property.	
4.1	mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model:		who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions)  Who has an interest in the one.	property? Check  bly s and another  hity property (see	Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property?  Do not deduct secured the amount of any secu	red claims on Schedule a claims Secured by Property.  Current value of the portion you own?  claims or exemptions. Pured claims on Schedule a claims on cl	
4.1	mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year:		who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions)  Who has an interest in the one.  Debtor 1 only	property? Check  hly s and another hity property (see property? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classifications	red claims on Schedule and secured by Property.  Current value of the portion you own?  claims or exemptions. Pured claims on Schedule and secured by Property.	
4.1	mples: Boats, trailers, motors No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage:		who has an interest in the one.  Debtor 1 and Debtor 2 or At least one of the debtor instructions)  Who has an interest in the one.  Debtor 1 and Debtor 2 or At least one of the debtor instructions)  Who has an interest in the one.  Debtor 1 only  Debtor 2 only	property? Check  hly s and another hity property (see property? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the	claims or exemptions. Puried claims or exemptions. Puried claims or exemptions. Puried claims or exemptions. Puried claims on Schedule and Secured by Property.  Current value of the	
4.1	mples: Boats, trailers, motors No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage:		who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions)  Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or	property? Check  Illy s and another  Inity property (see  property? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the	claims or exemptions. Puried claims or exemptions. Puried claims or exemptions. Puried claims or exemptions. Puried claims on Schedule and Secured by Property.  Current value of the	

#### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 13 of 74

St Hilaire Debtor 1 Antonio Case number (if known) First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... used furniture (sectional) \$350.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... used electronics (tablet, game system, TV, Cell phone, Laptop) \$825.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... used clothing \$350.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1525.00 for Part 3. Write that number here ......

#### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 14 of 74

St Hilaire Debtor 1 Antonio Case number (if known) First Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$50.00 17.1. Checking account: Chase 17.2. Checking account: **PNC** \$0.00 17.3. Checking account: PNC \$0.00 17.4. Checking account: \$25.00 Suntrust Bank 17.5. Savings account: \$0.00 **PNC** 17.6. Savings account: 17.7. Certificates of deposit: 17.8. Other financial account: 17.9. Other financial account: 17.10. Other financial account: 17.11. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: \$260.00 Stash Stock 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about them

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 15 of 74

Deb <sup>1</sup>	tor 1 Antonio	L	St Hilaire	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instruments	orate bonds and other negotial include personal checks, cashiers ents are those you cannot transfe	checks, promissory note	s, and money orders.	
	Yes. Give specific information about them	Issuer name:			
		-			
21.	Retirement or pension Examples: Interests in IR		, thrift savings accounts,	or other pension or profit-sharing plans	
	No	Type of account:	Institution name:		
	Yes. List each account	401(k) or similar plan:	401k through work		\$235.00
	separately.		401K tillough Work		-
		Pension plan:			-
		IRA:	-		
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		prepayments I deposits you have made so that with landlords, prepaid rent, public			
	Yes	Electric:			
	_	Gas:			-
		Heating oil:  Security deposit on rental unit:			
		· .	-		
		Prepaid rent:			
		Telephone:			
		Water:			-
		Rented furniture:			
		Other:			_
23.		or a periodic payment of money to	you, either for life or for a	a number of years)	
	✓ No	Issuer name and description:			
	Yes				
					<u> </u>

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 16 of 74

Debt	or 1 Antonio	L	St Hilaire	Case number (if known)	
24.	First Name	Middle Name	Last Name	r a qualified state tuition program.	
27.	26 U.S.C. §§ 530(b)(1), 529		ed ABLE program, or under	a quamica state taition program.	
		me and description. Separately fi	ile the records of any interests	s.11 U.S.C. § 521(c):	
	Yes				
25.	Trusts, equitable or future exercisable for your benefi	interests in property (other th	han anything listed in line 1	I), and rights or powers	
	<b>✓</b> No				
	Yes. Describe				
26.		marks, trade secrets, and oth ames, websites, proceeds from		ments	
	, No	, , , ,	, 0		
	Yes. Describe				
27.	Licenses, franchises, and				
		exclusive licenses, cooperative a	essociation holdings, liquor lic	censes, professional licenses	
	✓ No Yes. Describe				
	-	<del></del>			
Mor	nov or proporty awad to	(011)			Current value of the
Mor	ney or property owed to	you?			Current value of the portion you own?  Do not deduct secured
		you?			portion you own?
	Tax refunds owed to you	you?			portion you own? Do not deduct secured
				Federal:	portion you own? Do not deduct secured
	Tax refunds owed to you  ✓ No	ation ing whether		Federal: State:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed to you  No Yes. Give specific information about them, including	ation ing whether e returns		State:	portion you own? Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds owed to you  No Yes. Give specific informa about them, includi you already filed the and the tax years  Family support	ation ing whether e returns		State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you  No Yes. Give specific informa about them, includi you already filed the and the tax years  Family support  Examples: Past due or lump s	ation ing whether e returns	child support, maintenance, c	State:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you  No Yes. Give specific information about them, including your already filed the and the tax years  Family support Examples: Past due or lump so	ation ing whether e returns s sum alimony, spousal support, o	child support, maintenance, c	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you  No Yes. Give specific informa about them, includi you already filed the and the tax years  Family support  Examples: Past due or lump s	ation ing whether e returns s sum alimony, spousal support, o	child support, maintenance, c	State:  Local: divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to you  No Yes. Give specific information about them, including your already filed the and the tax years  Family support Examples: Past due or lump so	ation ing whether e returns s sum alimony, spousal support, o	child support, maintenance, c	State: Local: divorce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t
28.	Tax refunds owed to you  No Yes. Give specific information about them, including your already filed the and the tax years  Family support Examples: Past due or lump so	ation ing whether e returns s sum alimony, spousal support, o	child support, maintenance, c	State: Local: divorce settlement, property settlemen Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00  \$0.00  t  \$0.00 \$0.00
28.	Tax refunds owed to you  No Yes. Give specific information about them, including your already filed the and the tax years  Family support Examples: Past due or lump so	ation ing whether e returns s sum alimony, spousal support, o	child support, maintenance, c	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you  No Yes. Give specific information about them, including your already filed the and the tax years  Family support Examples: Past due or lump so No Yes. Give specific informations Other amounts someone or	ation ing whether e returns sum alimony, spousal support, of ation		State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you  No Yes. Give specific information about them, including your already filed the and the tax years  Family support Examples: Past due or lump so No Yes. Give specific informations Other amounts someone over Examples: Unpaid wages, dis	ation ing whether e returns sum alimony, spousal support, of ation	bility benefits, sick pay, vacat	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you  No Yes. Give specific information about them, including your already filed the and the tax years  Family support Examples: Past due or lump so No Yes. Give specific informations Other amounts someone over Examples: Unpaid wages, dis	ation ing whether e returns	bility benefits, sick pay, vacat	State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including your already filed the and the tax years  Family support  Examples: Past due or lump so  ✓ No  Yes. Give specific information of the amounts someone over the second of the second	ation ing whether e returns	bility benefits, sick pay, vacat	State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 17 of 74

Deb <sup>-</sup>	tor 1 Antonio L	St Hilaire	Case number (if known)	
	First Name Middle Name	Last Name		
31.	Interests in insurance policies  Examples: Health, disability, or life insurance; he	alth savings account (HSA); credit, ho	meowner's, or renter's insurance	
	No	_		
	Yes. Name the insurance company	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its value	Term Life through work		\$0.00
32.	Any interest in property that is due you from If you are the beneficiary of a living trust, expect property because someone has died.		or are currently entitled to receive	
	<b>✓</b> No			
	Yes. Describe			
33.	Claims against third parties, whether or not Examples: Accidents, employment disputes, ins  No Yes. Describe		demand for payment	
34.	Other contingent and unliquidated claims of to set off claims	f every nature, including countercl	aims of the debtor and rights	
	<b>✓</b> No			
	Yes. Describe			
35.	Any financial assets you did not already list			
	Yes. Describe			
	Tes. Describe			
36.	Add the dollar value of all of your entries fro for Part 4. Write that number here			\$570.00
Part	5: Describe Any Business-Related Pro	operty You Own or Have an Int	terest In. List any real estate in Part	1.
				•
37.		norgan in any business-relateu pro	•	irrent value of the
	No. Go to Part 6.			rtion you own?
	Yes. Go to line 38.			not deduct secured claims
20	Accounts receivable or commissions very all	randir an ward	or	exemptions
აგ.	Accounts receivable or commissions you all	еацу еагнец		
	<b>✓</b> No			
	Yes. Describe			
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, softwar	e, modems, printers, copiers, fax mac	hines, rugs, telephones, desks, chairs, electro	onic devices
	<b>✓</b> No			
	Yes. Describe			

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 18 of 74

Deb	tor 1 Antonio	L	St Hilaire	Case number (if known)	
ı	First Name	Middle Name	Last Name		
40.	Machinery, fixtures,	equipment, supplies you	use in business, and tools of you	ur trade	
	<b>✓</b> No				
	Yes. Describe				
	-				
41.	Inventory				
	<b>✓</b> No				
	Yes. Describe				I
	Ш				
42.	Interests in partners	hips or joint ventures			
	✓ No				
	Yes. Give specific		Name of entity:	% of ownership:	
	information about				
	them				
43.	Customer lists, mailing	g lists, or other compilati	ons		
	—				
	✓ No			0.0.0.101/414)	
	Yes. Do your lists	include personally identifiat	ole information (as defined in 11 U	.S.C. § 101(41A))?	
	□ No				
	Yes. Desc	cribe			
	Ш				
44.	Any business-related	property you did not alre	eady list		
	<b>√</b> No				
	ightharpoonup				<del></del>
	Yes. Give specific information				
	omadon iliin				
					<del></del>
					<u> </u>
					<del></del> -
45. A	dd the dollar value of	all of your entries from P	art 5, including any entries for p	pages you have attached	
for Pa	art 5. Write that numb	er here			
	Describe Any F	arm- and Commercia	al Fishing-Related Property	You Own or Have an Interest In.	
Part	If you own or have a	n interest in farmland, list it in	n Part 1.	Tod Own of Flave all filterest fil.	
40				of California and a second O	
46.	Do you own or nave a	any legal or equitable int	erest in any farm- or commercia	al fishing-related property?	0
	✓ No. Go to Part 7.				Current value of the portion you own?
	Yes. Go to line 47	•			Do not deduct secured claims
	_				or exemptions
47.	Farm animals				
	Examples: Livestock, p	ooultry, farm-raised fish			
	<b>✓</b> No				
	Yes. Describe				

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 19 of 74

Debto	r 1 Antonio First Name	L Middle Name	St Hilaire Last Name	Case number (if known)	
48. <b>(</b>	Crops-either growing		Last Name		
	No No				
İ	Yes. Describe				
•	_				
49. <b>F</b>	arm and fishing equip	oment, implements, machinery, fix	ctures, and tools of tra	ade	
	✓ No		,		
İ	Yes. Describe				
•	_				
50. <b>F</b>	arm and fishing supp	lies, chemicals, and feed			
ſ	<b>√</b> No				
İ	Yes. Describe				
_					
51. A	Any farm- and comme	rcial fishing-related property you	did not already list		
ſ	<b>√</b> No				
į	Yes. Describe				
52 Ada	the dellar value of a	I of your entries from Part 6, inclu	iding any entrice for n	pages you have attached	
		here			
Part 7:	Describe All Pro	perty You Own or Have an In	terest in That You [	Did Not List Above	
		perty of any kind you did not alrea	dy list?		
		s, country club membership			
	✓ No  Yes. Give specific				
L	information				
54. Add	d the dollar value of a	I of your entries from Part 7. Write	e that number here		▶
Part 8:	List the Totals of	Each Part of this Form			
55. <b>Pa</b>	ırt 1: Total real estate	, line 2		<b>&gt;</b>	
56. <b>pa</b>	rt 2 total vehicles, lin	e 5	\$4037.50		
57. <b>Pa</b> i	rt 3: Total personal ar	d household items, line 15	\$1525.00		
58. <b>Pa</b>	rt 4: Total financial as	sets, line 36			
		elated property, line 45	\$570.00	<del></del>	
			-	<u> </u>	
		ishing-related property, line 52		<u></u>	
		erty not listed, line 54			
62. <b>To</b>	tal personal property.	Add lines 56 through 61	\$6132.50	Copy personal property total	+ \$6132.50
				Copy personal property total	
63. <b>T</b> ot	tal of all property on S	schedule A/B. Add line 55 + line 62.			\$6132.50
					1

		Case 18-0807	5 Doc 1	Filed 03/20/1 Document	8 Entered 03/20 Page 20 of 74	/18 17:20:33	Desc Main
Fill	in this inforr	nation to identify your ca	se:				
Del	btor 1	Antonio First Name	L Middle Na	St Hi	aire Name		
_	btor 2 ouse, if filing)	First Name	Middle Na		Name		
Uni	ited States B	ankruptcy Court for the:	Northern	District of	Illinois (State)		
	se number nown)						
Ot	fficial I	Form 106C					Check if this is an amended filing
Sc	chedule	C: The Prope	erty You C	laim as Ex	empt		04/16
as e add For stat the tax- unc	exempt. If reditional pages each item te a specificamount of exempt redier a law the exemption.	nore space is needed, jes, write your name ar of property you clair ic dollar amount as e f any applicable statuetirement funds—ma	fill out and attace and case number as exempt, you axempt. Alternate attory limit. Some by be unlimited i ion to a particul to the applicable	ch to this page as (if known). ou must specify tively, you may of e exemptions—s n dollar amount lar dollar amount e statutory amou	many copies of Part 2: A the amount of the exen laim the full fair marke uch as those for health However, if you claim t and the value of the p	Additional Page as in a page as	the property that you claim necessary. On the top of any one way of doing so is to erty being exempted up to eive certain benefits, and 00% of fair market value ned to exceed that amount,
1.		of exemptions are you		-	spouse is filing with you.		
	✓ You a	are claiming state and fed	deral nonbankrup	tcy exemptions. 11	U.S.C. § 522(b)(3)		
	ш	are claiming federal exen	•				
2.	For any p	operty you list on Sched	lule A/B that you	claim as exempt, f	II in the information below		
	Brief desc	ription of the property a	nd Current v	alue of Amour	t of the exemption you cla	im Specifi	c laws that allow exemption

line on Schedule A/B that lists this the portion you Check only one box for each exemption. property Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(a) \$350.00 description: lacksquare\$350.00 used clothing 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$350.00 description: lacksquare\$350.00 used furniture 100% of fair market value, up to any (sectional) applicable statutory limit Line from Schedule A/B: 06 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) **✓** No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 21 of 74

Debtor 1 Antonio L St Hilaire Case number (if known)
First Name Middle Name Last Name

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
	Copy the value from Schedule A/B		
Brief description:	\$825.00	\$825.00	735 ILCS 5/12-1001(b)
used electronics (tablet, game system, TV, Cell phone, Laptop)		100% of fair market value, up to any applicable statutory limit	_
Line from Schedule A/B:07			
Brief description:	\$50.00	\$50.00	735 ILCS 5/12-1001(b)
Checking account, Chase Line from		100% of fair market value, up to any applicable statutory limit	_
Schedule A/B: 17			705 11 00 5 (40 4004 (4)
Brief description: Checking account, PNC	\$0.00	<b>V</b> \$0	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17		100% of fair market value, up to any applicable statutory limit	_
Brief description:	\$0.00		735 ILCS 5/12-1001(b)
Checking account, PNC	Ψ0.00	\$0	_
Line from Schedule A/B: 17		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$0.00	<b>7</b>	735 ILCS 5/12-1001(b)
Savings account, PNC		\$0 100% of fair market value, up to any	_
Line from Schedule A/B:17		applicable statutory limit	
Brief description:	\$25.00	<b>V</b>	735 ILCS 5/12-1001(b)
Checking account, Suntrust Bank		\$25.00 100% of fair market value, up to any	_
Line from Schedule A/B: 17		applicable statutory limit	
Brief description:	\$235.00		735 ILCS 5/12-1006
401(k) or similar plan, 401k through work	4200.00	\$235.00  100% of fair market value, up to any	_
Line from Schedule A/B: 21		applicable statutory limit	
Brief description:	\$260.00	<b>7</b>	735 ILCS 5/12-1001(b)
Stash Stock		\$260.00	_
Line from Schedule A/B:18		applicable statutory limit	
Brief description:	\$0.00	<b>7</b>	735 ILCS 5/12-1001(f)
Term Life through work	_	\$0 100% of fair market value, up to any	_
Line from <i>Schedule A/B:</i> 31		applicable statutory limit	

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 22 of 74

Fill in	this information to identify your case	se:				
Debto	or 1 Antonio	L	St Hilaire			
20010	First Name	Middle Name	Last Name			
Debto						
(Spous	e, if filing) First Name	Middle Name	Last Name			
Unite	d States Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case (If knov	number vn)		(Glate)			
Off	icial Form 106D					Check if this is a amended filing
	hedule D: Credito	ors Who Hav	e Claims Secure	ed by Pron	ertv	12/1
	complete and accurate as possib					
more	space is needed, copy the Additio			•		
	and case number (if known).		•			
1.	Do any creditors have claims se				ant an this farms	
	<b>_</b>		ith your other schedules. You hav	e nothing else to rep	ort on this form.	
	Yes. Fill in all of the information	n below.				
Part	1: List All Secured Claims					
2.	List all secured claims. If a credit			Column A	Column B	Column C
	separately for each claim. If more the in Part 2. As much as possible, list	•		Amount of claim Do not deduct the	Value of collateral	Unsecured portion
	name.	·	· ·	value of collateral.	that supports	If any
0.1	VW CREDIT INC			¢14.000.00	this claim	ΦΩ <u>ΓΩ</u> Γ ΩΩ
2.1	Creditor's Name		that secures the claim:	\$14,200.00	\$5,675.00	<u>\$8,525.00</u>
	1401 FRANKLIN BLVD  Number Street	072 Automobile  As of the date you file	the claim is: Check all that apply.			
		Contingent	the statil for enound an area apply.			
	LIBERTYVILLE IL 60048	Unliquidated				
	City State ZIP Code	Disputed				
	Who owes the debt? Check one.  Debtor 1 only	Nature of lien. Check al	I that apply			
	Debtor 2 only		nade (such as mortgage or secured			
	Debtor 1 and Debtor 2 only	car loan)	idae (suon as mongage or secured			
	At least one of the debtors	Statutory lien (such a	as tax lien, mechanic's lien)			
	and another	Judgment lien from	a lawsuit			
	Check if this claim relates to a community debt	Other (including a rig	ht to offset)			
	Date debt was 10/2016 incurred	Last 4 digits of accoun	t number 8857			
2.2	ONEMAIN Creditor's Name	Describe the property	that secures the claim:	\$8,771.00	\$1,200.00	\$7,571.00
	PO BOX 1010  Number Street	048 InstallmentLoan	the claim is: Check all that apply.			
	Number Street	Contingent	the claim is. Oneck all that apply.			
	EVANSVILLE IN 47706	Unliquidated				
	City State ZIP Code	Disputed				
	Who owes the debt? Check one.  Debtor 1 only	Nature of lien. Check al	I that apply			
	Debtor 1 only  Debtor 2 only		nade (such as mortgage or secured			
	Debtor 1 and Debtor 2 only	car loan)	idae (suon as mongage or secured			
	At least one of the debtors	Statutory lien (such a	as tax lien, mechanic's lien)			
	and another	Judgment lien from	a lawsuit			
	Check if this claim relates to a community debt	Other (including a rig	ht to offset)			
	Date debt was 7/2017 incurred	Last 4 digits of accoun	t number4220			
	Add the dollar value of y here:	our entries in Column A	on this page. Write that number	\$22,971.00		

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 23 of 74

Fill i	n this inforr	nation to identify your c	ase:					
Deb	tor 1	Antonio	L	St Hilaire				
		First Name	Middle Name	Last Name				
Deb								
(Spo	use, if filing)	First Name	Middle Name	Last Name				
Unit	ed States B	ankruptcy Court for the:	Northern	District of Illinois (State)				
Case (If knd	e number own)	-						
Off	icial F	orm 106E/F				Che	eck if this is an	n amended filing
			ditors Who	Have Unsec	ured Claims			12/15
other Form clain the e know	r party to a 106A/B) a ns that are entries in th n).	any executory contracts and on Schedule G: Exe listed in Schedule D: C he boxes on the left. At	s or unexpired leases that cutory Contracts and Une reditors Who Hold Claims	could result in a claim. A expired Leases (Official Fo Secured by Property. If r	and Part 2 for creditors wit Also list executory contracts orm 106G). Do not include a nore space is needed, copy op of any additional pages, v	on <i>Sched</i> ny creditor the Part ye	ule A/B: Prop rs with partia ou need, fill i	perty (Official ally secured it out, number
1.	-	editors have priority un Go to Part 2.	secured claims against y	ou?				
2.	listed, ider As much a Continuati	ntify what type of claim it it as possible, list the claims on Page of Part 1. If more	is. If a claim has both priorit	y and nonpriority amounts, ling to the creditor's name. particular claim, list the othe		both priority	and nonprio	rity amounts.
						Total claim	Priority amount	Nonpriority amount

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 24 of 74

Debto	or 1 Antonio		L Middle Name	St Hilaire Last Name	Case number (if known)	
Part 2	4 List A	II of Your NONPRIOR				
3. [ [ 4. L	Oo any cre No. Yo ✓ Yes. List all of y	ditors have nonpriority uou have nothing to report	insecured claims ag in this part. Submit ed claims in the alpi	ainst you? this form to the on nabetical order o	court with your other schedules.  of the creditor who holds each claim. If a creditor has more	•
I1		one creditor holds a parti	•		ed, identify what type of claim it is. Do not list claims already in rt 3.If you have more than four priority unsecured claims fill ou	
						Total claim
4.1	325 W H	ty Creditor's Name uron St #300			ast 4 digits of account number 1981  'hen was the debt incurred? 6/2017	\$167.00
	Debt Debt Debt At lea	Illinois State Irred the debt? Check on or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and ok if this claim relates to him subject to offset?	another	de [	contingent Unliquidated Disputed  pe of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify 36 InstallmentLoan	
4.2		n - Bankruptcy				\$1,000.00
	Bolingbro City Who incu Debt Debt At lea Is the cla Yes	ty Creditor's Name re Shop Ctr 180 S Bolingth Street  Took Illinois State Irred the debt? Check on or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and or this claim relates to sim subject to offset?	60440 Zip Cod e. another	A: A: C: C: C: C: C: C: C: C: C: C: C: C: C:	then was the debt incurred?  If then was the debt incurred?  If the original origina	
4.3	Fort Lauc City Who incu	Street		A:	ast 4 digits of account number 2896 Then was the debt incurred? 7/2017  s of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed The of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	\$1,006.00
	_	ck if this claim relates to nim subject to offset?	a community debt	_ _	Debts to pension or profit-sharing plans, and other similar debts  001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA	

#### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 25 of 74

Debtor 1 Antonio St Hilaire \_\_\_ Case number (if known) Last Name Middle Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$700.00

4.4	Nonpriority Creditor's Name	Last 4 digits of account number	\$700.00
	Nonpriority Creditor's Name E23970 Pow Wow Tribal	When was the debt incurred?n/a	
	Number Street  Watersmeet Michigan 49969	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Other. Specify unsecured	
	Is the claim subject to offset?  No  Yes		
4.5	CAPITALONE Nonpriority Creditor's Name	Last 4 digits of account number 8686	\$2,441.00
	c/o Pollack & Rosen, P.C	When was the debt incurred? 4/2012	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	1825 Barrett Lakes Blvd Suite 510	Contingent	
	Kennesaw Georgia 30144	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one.  Debtor 1 only		
	<u>*</u>	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	<ul> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>	
	Is the claim subject to offset?	Other. Specify CreditCard	
	✓ No	_	
	Yes		
4.6	City of Chicago Parking Tickets Nonpriority Creditor's Name	— Last 4 digits of account number	\$100.00
	333 South State Street, Rm 540	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		— Contingent	
		Unliquidated	
	Chicago Illinois 60604	_ =	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Other. Specify unsecured	
	Is the claim subject to offset?	<del>_</del>	
	✓ No		
	Yes		

### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 26 of 74

Part 2	2: Your NONPRIORITY Unsecured Claims - Continuation Page					
	After listing any entries on this page, number them beginning wit	h 4.5, followed by 4.6, and so forth.	Total claim			
4.7	COMENITY BANK/ROOMPLCE Nonpriority Creditor's Name PO BOX 182789 Number Street	Last 4 digits of account number 9269  When was the debt incurred? 2/2016  As of the date you file, the claim is: Check all that apply.	\$2,114.00			
	COLUMBUS Ohio 43218 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  ✓ Other. Specify CreditCard				
4.8	Credit Box.com, LLC  Nonpriority Creditor's Name 2400 E Devon Ave Ste 300  Number Street   Des Plaines Illinois 60018  City State Zip Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No  Yes	When was the debt incurred?	\$700.00			
4.9	DEPT OF EDUCATION/NELN  Nonpriority Creditor's Name 121 S 13TH ST  Number Street  LINCOLN Nebraska 68508  City State Zip Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No  Yes	Last 4 digits of account number 3149  When was the debt incurred? 9/2009  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	\$5,710.00			

#### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 27 of 74

St Hilaire Debtor 1 Antonio Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** DEPT OF EDUCATION/NELN 4.10 \$5,588.00 - Last 4 digits of account number 3249 Nonpriority Creditor's Name 121 S 13TH ST When was the debt incurred? 1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent LINCOLN 68508 Nebraska Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.11 DEPT OF EDUCATION/NELN \$4,925.00 0749 Last 4 digits of account number Nonpriority Creditor's Name 121 S 13TH ST When was the debt incurred? 7/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent LINCOLN Nebraska 68508 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes 4.12 DEPT OF EDUCATION/NELN \$4,875.00 Last 4 digits of account number 9449 Nonpriority Creditor's Name When was the debt incurred? 9/2012 121 S 13TH ST Number As of the date you file, the claim is: Check all that apply. Contingent 68508 LINCOLN Nebraska Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

No Yes

Is the claim subject to offset?

Other. Specify

#### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 28 of 74

St Hilaire Debtor 1 Antonio Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page **Total claim** After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. DEPT OF EDUCATION/NELN 4.13 \$4,778.00 - Last 4 digits of account number 8249 Nonpriority Creditor's Name 121 S 13TH ST When was the debt incurred? 1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent LINCOLN 68508 Nebraska Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.14 DEPT OF EDUCATION/NELN \$3,084.00 2849 Last 4 digits of account number Nonpriority Creditor's Name 121 S 13TH ST When was the debt incurred? 1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent LINCOLN Nebraska 68508 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes 4.15 DEPT OF EDUCATION/NELN \$3,084.00 Last 4 digits of account number 2749 Nonpriority Creditor's Name When was the debt incurred? 9/2009 121 S 13TH ST Number As of the date you file, the claim is: Check all that apply. Contingent 68508 LINCOLN Nebraska Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

No Yes

Is the claim subject to offset?

Other. Specify

#### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 29 of 74

St Hilaire Debtor 1 Antonio Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** DEPT OF EDUCATION/NELN 4.16 \$3,019.00 - Last 4 digits of account number Nonpriority Creditor's Name 121 S 13TH ST When was the debt incurred? 8/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent LINCOLN 68508 Nebraska Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.17 DEPT OF EDUCATION/NELN \$2,868.00 8149 Last 4 digits of account number Nonpriority Creditor's Name 121 S 13TH ST When was the debt incurred? 1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent LINCOLN Nebraska 68508 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes 4.18 DEPT OF EDUCATION/NELN \$2,868.00 Last 4 digits of account number 9349 Nonpriority Creditor's Name When was the debt incurred? 9/2012 121 S 13TH ST Number As of the date you file, the claim is: Check all that apply. Contingent 68508 LINCOLN Nebraska Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset?

No Yes

#### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 30 of 74

St Hilaire Debtor 1 Antonio Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** DEPT OF EDUCATION/NELN 4.19 \$2,819.00 - Last 4 digits of account number 7649 Nonpriority Creditor's Name 121 S 13TH ST When was the debt incurred? 5/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent LINCOLN 68508 Nebraska Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.20 DEPT OF EDUCATION/NELN \$2,429.00 2949 Last 4 digits of account number Nonpriority Creditor's Name 121 S 13TH ST When was the debt incurred? 5/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent LINCOLN Nebraska 68508 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes 4.21 DEPT OF EDUCATION/NELN \$1,851.00 Last 4 digits of account number 3349 Nonpriority Creditor's Name When was the debt incurred? 8/2010 121 S 13TH ST Number As of the date you file, the claim is: Check all that apply. Contingent 68508 LINCOLN Nebraska Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset?

No Yes

#### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 31 of 74

St Hilaire Debtor 1 Antonio Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** DEPT OF EDUCATION/NELN 4.22 \$1,766.00 - Last 4 digits of account number 5749 Nonpriority Creditor's Name 121 S 13TH ST When was the debt incurred? 1/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent LINCOLN 68508 Nebraska Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.23 Green Arrow Loans \$300.00 Last 4 digits of account number Nonpriority Creditor's Name 64 Elbern Avenue When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Rutland 05701 Vermont Citv State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ unsecured Is the claim subject to offset? **✓** No Yes 4.24 MaxLend \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O Box 639 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Parshall North Dakota 58770 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts

No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify \_

unsecured

#### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 32 of 74

St Hilaire Debtor 1 Antonio Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** MERRICK BANK CORP 4.25 \$1,464.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 8/2015 PO BOX 9201 Number Street As of the date you file, the claim is: Check all that apply. Contingent **OLD BETHPAGE** 11804 New York Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? ◪ **✓** No Yes 4.26 Money Lion LLC \$400.00 Last 4 digits of account number Nonpriority Creditor's Name 501 5th Ave When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated New York 10017 New York Citv State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ unsecured Is the claim subject to offset? **✓** No Yes Navient \$2,471.00 Last 4 digits of account number 0711 Nonpriority Creditor's Name When was the debt incurred? 9/2006 PO BOX 9655 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt

✓ No Yes

Is the claim subject to offset?

debts Other. Specify

#### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 33 of 74

St Hilaire Debtor 1 Antonio Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.28 PENN CREDIT CORPORATIO \$127.00 Last 4 digits of account number Nonpriority Creditor's Name 916 S 14TH ST When was the debt incurred? 10/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **HARRISBURG** 17104 Pennsylvania Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? ✓ ORIGINAL CREDITOR: CITY OF **✓** No Other. Specify TALLAHASSEE UTILIT Yes 4.29 PERSONAL FINANCE/MARIN \$1,108.00 Last 4 digits of account number Nonpriority Creditor's Name 8211 TOWN CENTER DR When was the debt incurred? 10/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent **BALTIMORE** Maryland 21236 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_ Is the claim subject to offset? 018 InstallmentLoan **✓** No Yes Rapital Capital 4.30 \$1,600.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 168 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60016 Des Plaines Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify

unsecured

#### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 34 of 74

St Hilaire Debtor 1 Antonio Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** SYNCB/WALMART 4.31 \$777.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 530927 When was the debt incurred? 6/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent 30353 Atlanta Georgia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? Yes Total Loan Company, LLC \$3,500.00 Last 4 digits of account number Nonpriority Creditor's Name 2174 Gladstone Ct When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60139 Glendale Heights Citv State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ unsecured Is the claim subject to offset? **✓** No Yes WEBBANK/FINGERHUT \$1,934.00 Last 4 digits of account number 5355 Nonpriority Creditor's Name When was the debt incurred? 1/2016 7075 Flying Cloud Dr Number Street As of the date you file, the claim is: Check all that apply. Contingent 55344 Eden Prairie Minnesota Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_ CreditCard Is the claim subject to offset?

✓ No Yes Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 35 of 74

Debtor 1 Antonio L St Hilaire Case number (if known)

i ii st ivai	ne wildle Name Last Name			
Part 4: Add th	ne Amounts for Each Type of Unsecured Claim			
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	s for s	tatistical reporting purpos	es only
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00	
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that	6d.	\$0.00	
	amount here.		\$0.00	
	6e. Total. Add lines 6a through 6d.	6e.		
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$52,135.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$19,938.00	
	6i Total Add lines 6f through 6i	6i	\$72,073.00	

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 36 of 74

Fill in this information to identify your case:						
Debtor 1	Antonio	L	St Hilaire			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois (State)			
Case number (If known)			()			

### Official Form 106G

### Check if this is an amended filing

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or compa	ny with whom you have	the contract or lease	State what the contract or lease is for
2.1	Price, John Name  864 Sudfield Place			Residential Lease, Debtor is Lessee, Residential Lease
	Number	Street		
	Schaumburg	Illinois	60173	
	City	State	Zip Code	

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 37 of 74

			Do	cument Page	e 37 of 7	4
Fill in t	his infor	mation to identify your ca	se:			
Debtor	1	Antonio	L	St Hilaire		
Datasa	. 0	First Name	Middle Name	Last Name		
Debtor (Spouse,		First Name	Middle Name	Last Name		
United	States E	sankruptcy Court for the:	Northern	District of Illinois		
	ıumber			(State)		
(If known		-				
						Check if this is an amended filing
Offi	cial	Form 106H				anonded ming
			_			
Sch	edul	e H: Your Cod	ebtors			12/15
the ent known)	ries in t . Answe	he boxes on the left. Att r every question. have any codebtors? (If y	ach the Additional Page	to this page. On the to	p of any Add	eded, copy the Additional Page, fill it out, and number ditional Pages, write your name and case number (if
	California No	a, Idaho, Louisiana, Nevado. Go to line 3.	a, New Mexico, Puerto Rio	co, Texas, Washington, ar	nd Wisconsin	nity property states and territories include Arizona, 1.)
		s. Did your spouse, form No	er spouse, or legal equi	alent live with you at the	e time?	
			ity state or territory did y	ou live?	Fill in t	the name and current address of that person.
		Name of your spouse, fo	rmer spouse, or legal equ	valent		
		Number Street				
		City	State	Zip Co	de	
	again a	s a codebtor only if that	person is a guarantor or	cosigner. Make sure yo	ou have liste	use is filing with you. List the person shown in line 2 and the creditor on <i>Schedule D</i> (Official Form 106D), <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.
	Column	1: Your codebtor			Colu	umn 2: The creditor to whom you owe the debt
					Che	ck all schedules that apply:
3.1	Mckinnie	e, Vanessa				Schedule D, line 2.1
	Name				— <u> </u>	· ———
		1234 street name				Schedule E/F, line

60105

Zip Code

Schedule G, line \_

Number

City

Bensenville

Street

Illinois

State

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 38 of 74

		20	oamone	. ago oo	01 1 1		
Fill in the	his information to identify	your case:					
Debtor	1 Antonio	1	St Hila	iro			
Debtoi	First Name	Middle Name	Last N		—   Cho	eck if this is:	
Debtor							
(Spouse,	if filing) First Name	Middle Name	Last N	ame		An amended filing	
the:	States Bankruptcy Court for	Northern	District of Illi	inois State)		A supplement showing post-peti expenses as of the following dat	
Case nu (If known)					_	MM / DD / YYYY	
Offic	ial Form 106I						
Sche	edule I: Your In	come					12/15
spouse. number		, attach a separate she y question.		-		not include information abo ional pages, write your nam	-
	in your employment		Debtor 1			Debtor 2	
		Employment status	<b>✓</b> Emplo	ved		Employed	
	ou have more than one job, ch a separate page with		-	mployed		Not Employed	
	rmation about additional ployers.	Occupation					
	ude part time, seasonal, or -employed work.	Employer's name	ENGS				
	cupation may include student	Employer's address	One Pierce				
	omemaker, if it applies.		Number St			Number Street	
			Suite 1100	) West		<u> </u>	
			Itasca	Illinois	60143	=	
			City	State	Zip Code	City State	Zip Code
		How long employed there?					
Part 2	Give Details About N	Nonthly Income					
spouse If you o	e unless you are separated.	e more than one employer	-		-	write \$0 in the space. Include you	_
				For	Debtor 1	For Debtor 2 or non-filing spouse	
	ist monthly gross wages, sala eductions.) If not paid monthly e.			2.	\$3,110.96		
3. <b>E</b> s	stimate and list monthly over	rtime pay.		3.	+ \$0.00	-	
4. <b>C</b>	<b>alculate gross income.</b> Add li	ine 2 + line 3.		4.	\$3,110.96		

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 39 of 74

Deb	tor 1Antonio First Name		St Hilaire Last Name		Case number			
	riist Name	Mildule Name	Last Name		known) For Debtor 1	For Debtor 2 or non-filing spouse		
C	opy line 4 here		→	4.	\$3,110.96			
	st all payroll ded							
		and Social Security deductions		5a.	\$595.48			
5	b. <b>Mandatory co</b> n	ntributions for retirement plans		5b.	\$0.00			
5	c. Voluntary cont	ributions for retirement plans		5c.	\$93.32			
5	d. Required repay	yments of retirement fund loans		5d.	\$0.00			
5	e. Insurance			5e.	\$208.88			
5	f. Domestic suppo	ort obligations		5f.	\$0.00			
5	g. <b>Union dues</b>			5g.	\$0.00			
5	h. Other deduction	ons. Specify:		5h. +	\$0.00 +			
6. <b>A</b> 6 +5h.		<b>ductions.</b> Add lines 5a + 5b + 5c + 5d + 5e +5	of + 5g	6.	\$897.68			
7. <b>C</b> a	alculate total mo	nthly take-home pay. Subtract line 6 from line	e 4.	7.	\$2,213.28			
8. <b>Li</b>	st all other incom	ne regularly received:						
8	business, profe	•						
		ent for each property and business showing ordinary and necessary business expenses, and	d					
	the total monthly	y net income.		8a.	\$0.00			
8	b. Interest and di	vidends		8b.	\$0.00			
8	dependent reg	-						
		, spousal support, child support, maintenance, nt, and property settlement.		8c.	\$0.00			
8	d. <b>Unemployment</b>	t compensation		8d.	\$0.00			
8	e. Social Security	,		8e.	\$0.00			
8	Include cash ass	ent assistance that you regularly receive istance and the value (if known) of any non- that you receive, such as food stamps (benefits emental Nutrition Assistance Program) or es		8f.	<u>\$0.00</u>			
8	g. Pension or reti	rement income		8g.	\$0.00			
8	h. Other monthly	income. Specify:		8h. +	\$0.00 +			
9. <b>A</b>	dd all other incon	ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g	+ 8h.	9.	\$0.00			
		income. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing s		10.	\$2,213.28 +		=	\$2,213.28
lr fr	nclude contribution iends or relatives.	gular contributions to the expenses that your strom an unmarried partner, members of your amounts already included in lines 2-10 or amo	r househol	d, your	dependents, your roomn	,		
s	pecify:						11. +	\$0.00
		n the last column of line 10 to the amount in the Summary of Schedules and Statistical Su				,	12.	\$2,213.28
, v	me that amount o	a.s cammay or correduces and statistical su	ary OI	Jordin	Elabilitico alta Histolica Da	ш, п к аррпоэ		Combined monthly income
13. [	No.	increase or decrease within the year after	you file th	is form	?			· ,
L	Yes. Explain:							

### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main

		Docu	$\frac{1}{2}$ ument Page 40 of 7	4		
Fill in this info	rmation to identify you	ır case:				
Debtor 1	Antonio	L	St Hilaire			
Debtor 2	First Name	Middle Name	Last Name	Check if this is:		
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended fili	ng	
	Bankruptcy Court for th	ne: <u>Northern</u>	District of Illinois (State)	A supplement s expenses as of		oetition chapter 13 date:
Case number (If known)	-		_	MM / DD / YYY	Y	
Official	Form 106J	J				
Schedul	e J: Your Ex	rpenses				12/15
information. If (if known). Ans	more space is neede swer every question.	ed, attach another sheet to this	re filing together, both are equal s form. On the top of any addition			
	cribe Your House	hold				
1. Is this a jo						
✓ No. G	o to line 2					
Yes. D	oes Debtor 2 live in a	a separate household?				
	No					
	Yes. Debtor 2 mus	t file Official Forms 106J-2, Expe	nses for Separate Household of Deb	tor 2.		
2. Do you hav	ve dependents?	No				
Do not list I Debtor 2.	Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2 Child	Dependent's age 3 years	Does depe with you?	endent live
					✓ Yes.	
_	penses include	No				
than yourself an	d your	Yes				
dependent	-					
Part 2: Esti	mate Your Ongoin	ng Monthly Expenses				
-	of a date after the ba		you are using this form as a supp oplemental Schedule J, check th			
	•	n-cash government assistance d it on <i>Schedule I: Your Incom</i> e	-			Your expenses
	I or home ownership or the ground or lot. 4.		nclude first mortgage payments and		4.	\$633.00
If not inc	luded in line 4:					
	estate taxes				4a	\$0.00
4b. Prope	rty, homeowner's, or r	renter's insurance			4b.	\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

## Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 41 of 74

6. Utilities:       6a.       \$120.00         6b. Water, sewer, garbage collection       6b.       \$0.00         6c. Teliaphona, cell phone, Internet, satellite, and cable services       6c.       \$90.00         6d. Other, Specify: Cell Phone       6d.       \$55.00         7. Food and housekeeping supplies       7.       \$500.00         8. Childcare and children's education costs       8.       \$600.00         9. Ciothing, laundry, and dry cleaning       9.       \$35.00         10. Personal care products and services       10.       \$45.00         11. Medical and dental expenses       11.       \$25.00         12. Transportation, include gas, maintenance, bus or brain fare.       12.       \$75.00         Do not include car payments       13.       \$8.00         14. Charitable contributions and religious donations       13.       \$8.00         15. Insurance.       15a.       \$8.00         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a.       \$8.00         15b. Health insurance       15b. \$9.00       \$9.00         15c. Vehicle insurance specify:       15b       \$0.00         15c. Vehicle insurance specify:       15c       \$9.00         15c. Taxes. Do not include taxes deducted from your pay or included in line	First Name	Middle Name	Last Name		
6. Utilities:       6.8. Estericity, heet, natural gas       6.8. \$120.00         6b. Water, sower, garbage collection       6b. \$0.00         6c. Telephone, cell phone, Internet, satellite, and cable services       6c. \$99.00         6d. Cher. Specify: Cell Phone       6d. \$55.00         7. Food and housekeeping supplies       7. \$500.00         8. Childcare and children's education costs       8. \$600.00         9. Clothing, laundry, and dry cleaning       9. \$35.00         10. Personal care products and services       10. \$45.00         11. Medical and dental expenses       11. \$25.00         12. Transportation, Include gas, maintenance, bus or train fare.       12. \$75.00         Do not include car payments       13. \$30.00         14. Charitable contributions and religious donations       13. \$30.00         15. Insurance.       15a. \$50.00         15b. Heeth insurance       15a. \$50.00         15c. Vahicle insurance       15a. \$50.00         15c. Vahicle insurance       15a. \$50.00         15c. Vahicle insurance.       15a. \$50.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.					Your expenses
6a. Eloctricity, heat, natural gas         6a.         \$120.00           6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$90.00           6d. Other, Speafty; Cell Phone         6d         \$85.00           7, Food and housekeeping supplies         7.         \$500.00           8. Childcare and children's education costs         8.         \$600.00           9. Clothing, laundry, and dry cleaning         9.         \$35.00           10. Personal care products and services         10.         \$45.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation, Include gas, maintenance, bus or train fare.         10.         \$45.00           15. Insurance.         11.         \$0.00           16. Charitable contributions and religious donations         13.         \$0.00           15. Insurance.         15.         \$15.00           15. Insurance.         15.         \$0.00           15. Least insurance deducted from your pay or included in lines 4 or 20.         15.         \$0.00           15. Least insurance.         15.         \$0.00         \$1.           15. Health insurance.         15.         \$0.00         \$1.     <	5. Additional mortgage payments t	or your residence, such as h	ome equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b. \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c. \$90.00           6d. Other. Specify: Cell Phone         6d. \$85.00           7. Food and housekeeping supplies         7. \$500.00           8. Childcare and children's education costs         8. \$800.00           9. Clotting, laundry, and dry cleaning         9. \$35.00           9. Clotting, laundry, and dry cleaning         9. \$35.00           10. Personal care products and services         10. \$45.00           11. Medical and dental expenses         11. \$25.00           12. Transportation. Include gas, maintenance, bus or train fare.         12. \$75.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13. \$0.00           14. Charitable contributions and religious donations         14. \$0.00           15. Insurance.         15a. Life insurance           15a. Life insurance         15a. \$0.00           15b. Health insurance         15b. \$0.00           15c. Vehicle insurance. Specify:         15c. \$150.00           15c. Vehicle insurance. Specify:         15c. \$150.00           15c. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           Specify:         17c. Care payments for Vehicle 1         17a. \$0.00      <	6. Utilities:				
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Cell Phone 6d. \$85.00 6d. Other. Specify: Cell Phone 7. Food and housekeeping supplies 8. Childcare and children's education costs 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$35.00 10. Personal care products and services 11. Medical and dental expenses 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. 12. Transportation. Include gas, maintenance, bus or train fare. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. 15. Insurance 15. Leath insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Leath insurance 15c. Vehicle insurance specify: 15c. Vehicle insurance. Specify: 15c. Vehicle insurance. Specify: 15c. Vehicle insurance. Specify: 15c. Vehicle insurance. Specify: 17c. Care payments for Vehicle 1 17b. Care payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17e. Other specify:	6a. Electricity, heat, natural gas			6a.	\$120.00
6d Other. Specify: Cell Phone   6d   \$85.00	6b. Water, sewer, garbage collection	on		6b.	\$0.00
7. Food and housekeeping supplies       7.       \$500.00         8. Childrare and childrare's education costs       8.       \$600.00         9. Clothing, laundry, and dry cleaning       9.       \$55.00         10. Personal care products and services       10.       \$45.00         11. Medical and dental expenses       11.       \$25.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$75.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       15.       \$0.00         15. Insurance.       156       \$0.00         15b. Health insurance deducted from your pay or included in lines 4 or 20.       15a       \$0.00         15c. Vehicle insurance. Specify:       156       \$0.00         15. Insurance. On not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         15c. Vehicle insurance. Specify:       16       \$0.00         16. Transportance. Specify:       16       \$0.00         17. Installment or lease payments:       17a       \$0.00         17a. Car payments for Vehicle 1       17a       \$0.00         17b. Car payments for Vehicle 2       17a       \$0.00	6c. Telephone, cell phone, Interne	t, satellite, and cable services		6c.	\$90.00
8. Childcare and children's education costs       8. S600.00         9. Clothing, laundry, and dry cleaning       9. \$35.00         10. Personal care products and services       10. \$45.00         11. Medical and dental expenses       11. \$25.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12. \$75.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13. \$0.00         14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       15a. \$0.00         15a. Life insurance deducted from your pay or included in lines 4 or 20.       15a. \$0.00         15b. Health insurance       15a. \$0.00         15c. Vehicle insurance.       15c. \$150.00         15d. Other insurance. Specify:       15d. \$0.00         15d. Charier surance. Specify:       15c. \$150.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       15c. \$0.00         15d. Car payments for Vehicle 1       17a. \$0.00         17a. Car payments for Vehicle 2       17b. \$0.00         17b. Car payments for Vehicle 2       17b. \$0.00         17c. Other. Specify:       17d. \$0.00         17d. Other. Specify:       17d. \$0.00         17b. Other spayments or alimony, maintenance, and support that you did not report a	6d. Other. Specify: Cell Phone			6d	\$65.00
9. Clothing, laundry, and dry cleaning       9.       \$35.00         10. Personal care products and services       10.       \$45.00         11. Medical and dental expenses       11.       \$25.00         12. Transportation, Include gas, maintenance, bus or train fare.       12.       \$75.00         Do not include car payments       13.       \$5.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$5.00         15. Insurance.       15.       \$5.00         15. Insurance.       15.       \$5.00         15a. Life insurance deducted from your pay or included in lines 4 or 20.       15a.       \$5.00         15c. Vehicle insurance       15b.       \$5.00         15c. Vehicle insurance. Specify:       15d.       \$5.00         15c. Vehicle insurance. Specify:       15d.       \$5.00         15c. Vehicle insurance. Specify:       15d.       \$5.00         15c. Vehicle insurance.       15c.       \$150.00         15c. Vehicle insurance.       15c.       \$150.00         15c. Vehicle insurance.       \$5.00       \$0.00         15c. Vehicle insurance.       \$5.00       \$0.00         15c. Vehicle insurance.       \$5.00       \$0.00         16. Taxes. Do not include taxes deducted fr	7. Food and housekeeping supplies	s		7.	\$500.00
10. Personal care products and services       10.       \$45.00         11. Medical and dental expenses       11.       \$25.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$75.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a       \$0.00         15b. Health insurance       15b       \$0.00         15c. Vehicle insurance. Specify:       15d       \$0.00         15c. Vehicle insurance. Specify:       15d       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         17c. Installment or lease payments:       17a       \$0.00         17b. Car payments for Vehicle 1       17a       \$0.00         17c. Other. Specify:       17c       \$0.00         17c. Other. Specify:       17c       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Offic	8. Childcare and children's educat	ion costs		8.	\$600.00
11. Medical and dental expenses       11.       \$25.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$75.00         12. Intertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance.       00 not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a       \$0.00         15b. Health insurance       15b. So.00       15c. Vehicle insurance       15c. So.00       \$0.00         15c. Vehicle insurance. Specify:       15d       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         Specify:       15a       \$0.00         17. Installment or lease payments:       17a       \$0.00         17. Cother. Specify:       17a       \$0.00         17b. Car payments for Vehicle 1       17a       \$0.00         17c. Other. Specify:       17d       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i).       16.         19. Other payments you make to support others who do not live with you.       \$0.00         Specify	9. Clothing, laundry, and dry clean	ing		9.	\$35.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  15. Transportation. Include insurance. Specify: 15c. Vehicle insurance. Specify: 15c. Vehicle insurance. Specify: 15c. Vehicle insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17c. Other. Specify: 17c. Other. Specify: 17c. Other. Specify: 17c. Other. Specify: 17c. Other. Specify: 17c. Other. Specify: 17c. Other payments for Vehicle 1, Your Income (Official Form 106i). 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). 19. Other payments you make to support others who do not live with you.  Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b. So.00 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. So.00 20d. Maintenance, repair, and upkeep expenses.	10. Personal care products and se	rvices		10.	\$45.00
Do not include car payments   13.	11. Medical and dental expenses			11.	\$25.00
14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       15. Insurance         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. If is \$0.00         15b. Health insurance       15b. \$0.00         15c. Vehicle insurance       15c. \$150.00         15c. Vehicle insurance. Specify:       15d. \$150.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         Specify:       16         17a. Installment or lease payments:       17a. \$0.00         17a. Car payments for Vehicle 1       17a. \$0.00         17b. Car payments for Vehicle 2       17b. \$0.00         17c. Other. Specify:       17c. \$0.00         17d. Other. Specify:       17d. \$0.00         18. Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       \$0.00         Specify:       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a. \$0.00         20b. Real estate taxes.       20b. \$0.00         20c. Property, homeowner's, or renter's insurance       20c. \$0.00         20d.	_	intenance, bus or train fare.		12.	\$75.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. Other insurance. Specify:  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  17e. Caze payments for Vehicle 1  17e. Care payments for Vehicle 2  17e. Other. Specify:  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. So.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20a. Mortgages on other property  20a. Mortgages on other property  20a. Mortgages on other property  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20c. Other. Real property, noneowner's, or renter's insurance  20d. So.00  20d. Maintenance, repair, and upkeep expenses.	13. Entertainment, clubs, recreation	on, newspapers, magazines,	and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	14. Charitable contributions and re	eligious donations		14.	\$0.00
15b. Health insurance		d from your pay or included in	lines 4 or 20.		
15c. Vehicle insurance       15c       \$150.00         15d. Other insurance. Specify:       15d       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         Specify:       16       \$0.00         17. Installment or lease payments:       16         17a. Car payments for Vehicle 1       17a       \$0.00         17b. Car payments for Vehicle 2       17b       \$0.00         17c. Other. Specify:       17c       \$0.00         17d. Other. Specify:       17d       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       \$0.00         Specify:       19.       \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a       \$0.00         20b. Real estate taxes.       20b       \$0.00         20c. Property, homeowner's, or renter's insurance       20c       \$0.00         20c. Property, homeowner's, or renter's insurance       20d       \$0.00         20c. Maintenance, repair, and upkeep expenses.       20d       \$0.00	15a. Life insurance			15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance			15b	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	15c. Vehicle insurance			15c	\$150.00
Specify:	15d. Other insurance. Specify:			15d	\$0.00
17. Installment or lease payments:  17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 20d. Maintenance, repair, and upkeep expenses.	16. Taxes. Do not include taxes dedu	acted from your pay or included	d in lines 4 or 20.		
17. Installment or lease payments:       17a. \$0.00         17a. Car payments for Vehicle 1       17b. \$0.00         17b. Car payments for Vehicle 2       17b. \$0.00         17c. Other. Specify:       17c. \$0.00         17d. Other. Specify:       17d. \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       19. \$0.00         Specify:       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a       \$0.00         20b. Real estate taxes.       20b       \$0.00         20c. Property, homeowner's, or renter's insurance       20c       \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d       \$0.00	Specify:			16	\$0.00
17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 20d. Maintenance, repair, and upkeep expenses.	17. Installment or lease payments:			10	
17c. Other. Specify:				17a	\$0.00
17d. Other. Specify:	17b. Car payments for Vehicle 2			17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:			17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20b. Solution on Schedule I: Your Income.  20c. Property, homeowner's, or renter's insurance  20c. \$0.00  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00				17d	\$0.00
19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00			•	19	\$0.00
Specify:		•	•	10.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00	, , ,			19.	\$0.00
20b. Real estate taxes.  20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses.  20d \$0.00	20.Other real property expenses n	ot included in lines 4 or 5 of	this form or on Schedule I: Your Income.		<del></del>
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	20a. Mortgages on other property			20a	\$0.00
20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	20b. Real estate taxes.			20b	\$0.00
	20c. Property, homeowner's, or re	enter's insurance		20c	\$0.00
20e. Homeowner's association or condominium dues 20e <b>\$0.00</b>	20d. Maintenance, repair, and upl	eep expenses.		20d	\$0.00
	20e. Homeowner's association or	condominium dues		20e	\$0.00

Official Form 106J Schedule J: Your Expenses page 2

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 42 of 74

Debtor 1			L	St Hilaire	Case number (if known)		
	First Na	ame	Middle Name	Last Name			
21. <b>Othe</b> i	r. Spec	ify:				21	\$0.00
00.0-1-							
	-	our monthly expenses	=				\$2,338.00
		es 4 through 21.					\$0.00
		ne 22 (monthly expense		\$2,338.00			
22c. A	Add line	e 22a and 22b. The resu		22.			
23. <b>Calc</b> ı	ılate y	our monthly net incom	e.				
23a. (	Copy lir	ne 12 (your combined m	onthly income) from	Schedule I.		23a	\$2,213.28
23b. (	Сору у	our monthly expenses fr	om line 22 above.			23b	\$2,338.00
23c. 9	Subtrac	t your monthly expenses	s from your monthly i	ncome.			(\$124.72)
	The res	sult is your monthly net i	ncome.			23c	
For e	- example	e, do you expect to finisl ayment to increase or de	h paying for your car	ses within the year after oan within the year or do you nodification to the terms of	ou expect your		
		Explain here:					

### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 43 of 74

Fill in this infor	mation to identify your c	ase:	
Debtor 1	Antonio	L	St Hilaire
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
Case number (If known)			(State)

#### Official Form 106Dec

### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below										
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?										
	✓ No										
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).									
	Under penalty of perjury, I declare that I have read the summary	and schedules filed with this declaration and									
	that they are true and correct.										
×	/s/ Antonio St Hilaire	×									
	Signature of Debtor 1	Signature of Debtor 2									
	Date 3/20/2018	Date									
	MM/DD/YYYY	MM/DD/YYYY									

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 44 of 74

Fill in	n this info	rmation to identify your o	ase:					
Debt		Antonio	L	St Hilaire				
		First Name	Middle	Name Last Nan	ne			
Debt (Spou	tor 2 use, if filing)	First Name	Middle	Name Last Nan	ne			
Unite	ed States I	Bankruptcy Court for the:	Northern	District of Illine				
	e number			(Sta	ite)			
(If kno	wn)							Check if this is a
Of	ficial	Form 107						amended filing
Sta	iteme	nt of Financia	ıl Affairs f	or Individuals	Filing for	Bankrı	ıptcy	04/1
infor	mation.		ed, attach a sep	arried people are filing arate sheet to this forn				
Part	1: Give	e Details About Your	Marital Status	and Where You Lived	Before			
1.	What is	your current marital st	atus?					
		ırried						
	✓ No	t married						
2.	During	the last 3 years, have yo	ou lived anywher	e other than where you l	ive now?			
	✓ No Yes		ou lived in the las	t 3 years. Do not include	where you live r	now.		
	De	btor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
					Same as	Debtor 1		Same as Debtor 1
	Nu	mber Street		From	Number Stre	et		From
	_			To	-			То
	City	y State	Zip Code		City	State	Zip Code	
		,				Debtor 1	p	Same as Debtor 1
					_			
	Nu	mber Street		From	Number Stre	et		From
				То				То
	City	y State	Zip Code		City	State	Zip Code	
	and territo No	<i>pries</i> include Arizona, Califo	omia, Idaho, Louis	pouse or legal equivalent siana, Nevada, New Mexico Codebtors (Official Form	, Puerto Rico, Te		- '	

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 45 of 74

Debt	or 1	Antonio L			Case numb	er (if known)		
		First Name Middle	Name Last	Name				
Part	2:	Explain the Sources of Your Inc	ome					
	Fill i	you have any income from employmenthe total amount of income you receivities. If you are filing a joint case and you not have.  No  Yes. Fill in the details.	red from all jobs and all b	usinesses, including part-	time		ars?	
			Debtor 1		De	Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions a exclusions)		purces of income heck all that apply.	Gross income (before deductions and exclusions)	
		om January 1 of current year until e date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$7777.00		Wages, commissions, bonuses, tips Operating a business		
		or last calendar year: anuary 1 to December 31,	✓ Wages, commissions, bonuses, tips ☐ Operating a business	\$27000.00	_ [	Wages, commissions, bonuses, tips Operating a business		
		or the calendar year before that: anuary 1 to December 31, 2016 ) YYYY	✓ Wages, commissions, bonuses, tips  Operating a business	\$25000.00	_ [	Wages, commissions, bonuses, tips Operating a business		
I F	nclu oubli iling _ist e	you receive any other income during de income regardless of whether that in ic benefit payments; pensions; rental inc a joint case and you have income that each source and the gross income from No  Yes. Fill in the details.	come is taxable. Example come; interest; dividends you received together, lis	es of other income are alin ; money collected from lav t it only once under Debto	vsuits; roya r 1.	alties; and gambling and lo		
١	_		Debtor 1			Debtor 2		
			Sources of income Describe below.	Gross income fro each source (before deduction and exclusions)		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	
		rom January 1 of current year until ne date you filed for bankruptcy:						
		or last calendar year: lanuary 1 to December 31, 2017 ) YYYY						
		or the calendar year before that: lanuary 1 to December 31, 2016 ) YYYY						
				<u> </u>				

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 46 of 74

St Hilaire Debtor 1 Antonio Case number (if known) Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you still owe Was this payment Dates of payment Total amount paid for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors Other

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 47 of 74

1	Antonio		L		Hilaire	Case number	(if known)
	First Name		Middle Name	Las	t Name		
nsi orp	ders include your porations of which	relatives; and you are and for a busin	ny general partners n officer, director, p ess you operate as	s; relatives of any operson in control,	general partners; parti or owner of 20% or	nerships of which y more of their voting	who was an insider? ou are a general partner; securities; and any managing domestic support obligations,
<b>✓</b>	No						
	Yes. List all pay	ments to a	an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
-	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	No		ranteed or cosigne t benefited an ins	•	Total amount paid	Amount you still owe	Reason for this payment  Include creditor's name
	Insider's Name						moduce creditor 3 mante
	Number Street						
-	City	State	Zip Code				
-	City Insider's Name	State	Zip Code				
-		State	Zip Code				

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 48 of 74

St Hilaire

Case number (if known) First Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

Debtor 1 Antonio

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 49 of 74

Debt	tor 1	Antonio	L	St Hilaire	Case number (if known	)	
		First Name	Middle Name	Last Name			
11.		thin 90 days before you file counts or refuse to make a			ank or financial institution,	set off any amou	ints from your
	<b>✓</b>	No Yes. Fill in the details.					
	Ш	res. I iii iii de detaile.					
				Describe the action the	creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street					
				Last 4 digits of account n	number: XXXX-		
		City State	Zip Code				
		Oity State	Zip Gode				
12.		hin 1 year before you filed cointed receiver, a custodia			oossession of an assignee fo	or the benefit of o	creditors, a court-
	<b>V</b>	No					
	Ħ	Yes					
Part	5:	List Certain Gifts and C	Contributions				
						_	
13.	Wi	ithin 2 years before you file	d for bankruptcy, did	you give any gifts with a to	otal value of more than \$600	) per person?	
	~						
		Yes. Fill in the details for a	each gift.				
		Gifts with a total value of per person	more than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave	the Gift				
		Number Street					
		City State	Zip Code				
		Person's relationship to you	1				
		Person to Whom You Gave	the Gift				
		N. arkara Obrasi					
		Number Street					
		City State	Zip Code				
		Person's relationship to you	ı				

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 50 of 74

Debtor 1	Antonio	L	St Hilaire	Case number (if know	'n)	
	First Name	Middle Name	Last Name	_		
14. Wit	thin 2 years before you file	d for bankruptcy, did	you give any gifts or contribution	s with a total value o	of more than \$600	to any charity?
	No					
✓						
П	Yes. Fill in the details for $\epsilon$	each gift or contributi	on.			
	Gifts or contributions to	charities	Describe what you contribut	-d	Date you	Value
	that total more than \$60		besombe what you contribut	Ju	contributed	Value
	that total more than \$60	· <u>v</u>			Contributou	
	Charity's Name		-			
			_			
	Number Street		-			
	Number Street					
	Oit. Otata	7:- O	-			
	City State	Zip Code				
art 6:	List Certain Losses					
gar ✓	nbling? No Yes. Fill in the details.					
	Describe the property yo	u loet and	Describe any insurance cove	rage for the loss	Date of your	Value of property
	how the loss occurred	u iost anu	Include the amount that insura		loss	lost
	now the loss occurred		pending insurance claims on lii		1033	1031
			A/B: Property.	ic do di <i>concadic</i>		
	List Certain Payments					
abo	out seeking bankruptcy or	preparing a bankrup	you or anyone else acting on your tcy petition? or credit counseling agencies for serv			anyone you consulted
abo	out seeking bankruptcy or lude any attorneys, bankrupt No	preparing a bankrup	tcy petition?			anyone you consulted
abo	but seeking bankruptcy or lude any attorneys, bankrupt	preparing a bankrup	tcy petition?			anyone you consulted
abo	out seeking bankruptcy or lude any attorneys, bankrupt No	preparing a bankrup	tcy petition? or credit counseling agencies for serv	ices required in your ba	ankruptcy.	
abo	out seeking bankruptcy or lude any attorneys, bankrupt No	preparing a bankrup	tcy petition?	ices required in your ba		Amount of
abo	out seeking bankruptcy or lude any attorneys, bankrupt No	preparing a bankrup	tcy petition? or credit counseling agencies for serv  Description and value of any	ices required in your ba	Date payment or transfer	
abo	out seeking bankruptcy or lude any attorneys, bankrupt No Yes. Fill in the details.	preparing a bankrup	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	out seeking bankruptcy or lude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm	preparing a bankrup	tcy petition? or credit counseling agencies for serv  Description and value of any	ices required in your ba	Date payment or transfer	Amount of
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid	preparing a bankrup	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	out seeking bankruptcy or lude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road	preparing a bankrup	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid	preparing a bankrup	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	out seeking bankruptcy or lude any attorneys, bankrupt No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road	preparing a bankrup	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400	preparing a bankrup cy petition preparers, o	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois	preparing a bankrup cy petition preparers, o	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400	preparing a bankrup cy petition preparers, o	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois City State	preparing a bankrup cy petition preparers, o	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois City State  Email or website address	preparing a bankrup cy petition preparers, o	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois City State  Email or website address None	preparing a bankrup cy petition preparers, o 60173 Zip Code	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois City State  Email or website address	preparing a bankrup cy petition preparers, o 60173 Zip Code	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois City State  Email or website address None	preparing a bankrup cy petition preparers, o 60173 Zip Code	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois City State  Email or website address None	preparing a bankrup cy petition preparers, o 60173 Zip Code	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois City State Email or website address None Person Who Made the Pay	preparing a bankrup cy petition preparers, o 60173 Zip Code	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois City State Email or website address None Person Who Made the Pay	preparing a bankrup cy petition preparers, o 60173 Zip Code	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois City State Email or website address None Person Who Mas Paid	preparing a bankrup cy petition preparers, o 60173 Zip Code	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois City State Email or website address None Person Who Mas Paid	preparing a bankrup cy petition preparers, o 60173 Zip Code	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois City State Email or website address None Person Who Was Paid Number Street	preparing a bankrup cy petition preparers, o 60173 Zip Code	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois City State Email or website address None Person Who Mas Paid	preparing a bankrup cy petition preparers, o 60173 Zip Code	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois City State Email or website address None Person Who Was Paid Number Street Suite 400 Schaumburg Illinois City State Email or website address None Person Who Made the Pay Person Who Was Paid Number Street	preparing a bankrup cy petition preparers, o 60173 Zip Code	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois City State Email or website address None Person Who Was Paid Number Street	preparing a bankrup cy petition preparers, o 60173 Zip Code	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois City State Email or website address None Person Who Was Paid Number Street Suite 400 Schaumburg Illinois City State Email or website address None Person Who Made the Pay Person Who Was Paid Number Street	preparing a bankrup cy petition preparers, o 60173 Zip Code	tcy petition? or credit counseling agencies for serv  Description and value of any transferred	ices required in your ba	Date payment or transfer was made	Amount of payment

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 51 of 74

ebtor 1	Antonio	L	St Hilaire	Case number (if known)		
	First Name	Middle Name	Last Name			
hel		editors or to make pay	you or anyone else acting on ments to your creditors? d on line 16.	our behalf pay or transfer a	any property to anyon	e who promised t
<b>✓</b>	No Yes. Fill in the details.					
			Description and value of transferred	any property	Date Ame payment or transfer was made	ount of payment
	Person Who Was Paid		_			
	Number Street		_			
	City State	e Zip Code	_			
Inc	ordinary course of your lude both outright transfer transfers that you have a No  Yes. Fill in the details.	rs and transfers made as	s security (such as the granting of	a security interest or mortgaç	je on your property). Do	o not include gifts
	res. I iii iii ule details.		Description and value of transferred		property or ceived or debts paid	Date transfer was made
	Person Who Received T	ransfer	_			
	Number Street		_			
	City State Person's relationship to	•	_			
	Person Who Received T	ransfer	_			
	Number Street		_			
	City State Person's relationship to	•	_			
ber	thin 10 years before you neficiary? ese are often called asset-		did you transfer any property to	a self-settled trust or simi	lar device of which yo	u are a
<b>✓</b>	No Yes. Fill in the details.					
			Description and value o	f the property transferred		Date transfer was made
	Name of trust					

### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 52 of 74

Debtor 1 Antonio L St Hilaire Case number (if known)
First Name Middle Name Last Name

Part	8:	List Certain Financial Accounts, Instru	uments, Safe Deposit Boxes, a	nd Stor	age Units		
20.	mov Incl	hin 1 year before you filed for bankruptcy, wed, or transferred? ude checking, savings, money market, or other peratives, associations, and other financial instit	financial accounts; certificates of dep				
		No Yes. Fill in the details.					
			Last 4 digits of account number	Type of instrun	f account or nent	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Person Who Was Paid	_ XXXX-		ecking vings		
		Number Street	_	Мо	oney market		
		City State Zip Code	_	Oth	okerage her		
		· ·	_ XXXX-	☐ Ch	ecking		
		Person Who Was Paid			vings		
		Number Street	_	Mc	oney market		
			_	Bro	okerage		
		City State Zip Code	<del>_</del>	Oth	her		
	othe	er valuables? No Yes. Fill in the details.	Who else had access to it?		Describe the conter	nts	Do you still have it?
		Name of Financial Institution	Name				No
		Number Street	Number Street				Yes
			City State Zip	Code			
		City State Zip Code					
22.	Hav	e you stored property in a storage unit or p	lace other than your home within	1 year be	fore you filed for bankr	uptcy?	
	<b>✓</b>	No Yes. Fill in the details.					
	Ц		Who else had access to it?		Describe the conter	ıts	Do you still have it?
		Name of Storage Facility	Name				No
		Number Street	Number Street				Yes
			City State Zip	Code			
		City State Zip Code					

#### Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 53 of 74

Debtor 1 Antonio Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 54 of 74

Debt		Antonio	L		St Hilaire	Case r	number <i>(if k</i>	known)	
		First Name	MI	ddle Name	Last Name				
26.	_	e you been a party No	y in any judicia	l or administr	ative proceeding under	any environmenta	il law? Inc	clude settlements and o	rders.
		Yes. Fill in the det	ails.						
					Court or agency		Nature of	f the case	Status of the case
		Case title			Court Name				Pending
		Case number			NumberStreet				On appeal
					City State	Zip Code			Concluded
Part	11:	Give Details Ab	oout Your Bus	siness or Co	onnections to Any Bu	siness			
27.	Witl	nin 4 years before	you filed for ba	ınkruptcy, did	l you own a business or	have any of the fol	llowing co	onnections to any busine	ess?
		A member of A partner in a An officer, dir	a limited liabilit a partnership rector, or mana	ty company (L	ade, profession, or other LC) or limited liability parties of a corporation quity securities of a corp	artnership (LLP)	-time or pa	art-time	
	<b>✓</b>	No. None of the a	bove applies.	Go to Part 12.					
		Yes. Check all that	at apply above	and fill in the	details below for each b	ousiness.			
					Describe the natu	ure of the business	,	Employer Identification include Social Security	
		Business Name			_			EIN:	
		Number Street			— Name of account	ant or bookkeeper		Dates business existed	
		City	State	Zip Code				From To	
					Describe the natu	ure of the business	•	Employer Identification include Social Security	
		Business Name			_			EIN:	
		Number Street			— Name of account			Dates business existed	I
		City	State	Zip Code	Name of account	ant or bookkeeper		From To	
					Describe the natu	ure of the business		Employer Identification include Social Security	
		Business Name			_			EIN:	
		Number Street			Name of account	ant or bookkeeper		Dates business existed	
		City	State	Zip Code				From To	

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 55 of 74

Debto	r 1 Antonio	L	St Hilaire	Case number (if known)
	First Name	Middle Name	Last Name	
	reditors, or	s before you filed for bankruptcy, dother parties.  In the details below.	id you give a financial stateme	nt to anyone about your business? Include all financial institutions,
			Date issued	
	Name		MM/DD/YYYY	
	Number	Street		
	City	State Zip Code		
Part 1	2: Sign Be	elow		
		ase can result in fines up to \$250,0		ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		Signature of Debtor 1		Signature of Debtor 2
		Date 3/20/2018		Date
<u> </u>	No Yes  d you pay or	additional pages to Your Statemer		
	Yes. Name	ot person		Attach the Bankruptcy Petition Preparer's Notice,

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 56 of 74

Fill in this information to identify your case:				
Debtor 1	Antonio	L	St Hilaire	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Northern	District of Illinois	
			(State)	
Case number (If known)				

Check if this is an amended filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.					
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?			
	Creditor's name: VW CREDIT INC  Description of property securing debt: 072 Automobile	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and	✓ No. Yes.			
	Creditor's name: ONEMAIN  Description of property securing debt: 048 InstallmentLoan	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.			
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.			
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and	No. Yes.			

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 57 of 74

	Antonio	L	St Hilaire	Case number (if	_
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired Person	onal Property Leases	i		_
informa		ate leases. Unexpired le	ases are leases that	y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).	
Des	scribe your unexpired personal	property leases		Will the lease be assumed?	
Les	ssor's name:			□ No □ Yes	
	scription of leased perty:			_	
Les	ssor's name:			□ No □ Yes	
	scription of leased perty:				
Les	ssor's name:			□ No □ Yes	
	scription of leased perty:				
Les	ssor's name:			☐ No ☐ Yes	
	scription of leased perty:				
Les	sor's name:			□ No □ Yes	
	scription of leased perty:				
Les	ssor's name:			No Yes	
	scription of leased perty:				
Les	ssor's name:			□ No □ Yes	
	scription of leased perty:				
Part 3:	Sign Below				
Unde			intention about any	property of my estate that secures a debt and any personal	
¥	/s/ Antonio St Hilaire		×		
_	ignature of Debtor 1			gnature of Debtor 2	
D	ate 3/20/2018 MM/DD/YYYY		Da	ate MM/DD/YYYY	

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 58 of 74

B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

		Northern Dist	crict of Illinois	
In re	Antonio L St Hilaire		Case No.	
	Debtor			(If known)
			Chapter _	Chapter 7
	DISCLOSURE OF	COMPENSATION	ON OF ATTORNE	Y FOR DEBTOR
co	ursuant to 11 U.S.C. § 329(a) and F ompensation paid to me within one ndered or to be rendered on behalf	year before the filing of th	e petition in bankruptcy, or agr	
Fc	or legal services, I have agreed to ac	ccept		\$1,750.00
Pr	rior to the filing of this statement I h	nave received		\$0.00
Ba	alance Due			\$1,750.00
2. Th	ne source of the compensation paid	to me was:		
	<b>Debtor</b>	Other (specif	fy)	
3. Th	ne source of the compensation paid	I to me is:		
	<b>J</b> Debtor	Other (specif	fy)	
4.	I have not agreed to share the ab members and associates of my la	ove-disclosed compensat aw firm.	ion with any other person unle	ss they are
	I have agreed to share the above members or associates of my lav the people sharing in the compe	v firm. A copy of the agree		
5. ln	return for the above-disclosed fee, a. Analysis of the debtor's finan bankruptcy;	•	•	e bankruptcy case, including: mining whether to file a petition in
	b. Preparation and filing of any	petition, schedules, staten	nents of affairs and plan which	may be required;
	c. Representation of the debtor	at the meeting of creditors	s and confirmation hearing, and	d any adjourned hearings thereof;
6. By	y agreement with the debtor(s), the	above-disclosed fee does	not include the following service	ces:
		CERTIF	ICATION	
	rtify that the foregoing is a complet s) in this bankruptcy proceedings.	e statement of any agreen	nent or arrangement for paymer	nt to me for representation of the
	3/20/2018		/s/ Corey A. Walters	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc">http://www.justice.gov/ust/eo/hapcpa/ccde/cc</a> approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 63 of 74

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	St. Hilaire, Antonio L	Case No.	Case No.		
	Debtor(s)				
		Chapter.	Chapter7		
	VERIFI	CATION OF CREDITOR MAT	RIX		
Th knowledge	•	fy that the attached list of creditors is tru	ue and correct to the best of their		
Date:	3/20/2018	/s/ St. Hilaire, Anto	onio L		
		St. Hilaire, Antonio Signature of Debt			

VW CREDIT INC 1401 FRANKLIN BLVD LIBERTYVILLE, IL, 60048

ONEMAIN PO BOX 1010 EVANSVILLE, IN, 47706

DEPT OF EDUCATION/NELN 121 S 13TH ST LINCOLN, NE, 68508

Navient PO Box 9640 Wilkes Barre, PA, 18773

CAPITALONE c/o Pollack & Rosen, P.C 1825 Barrett Lakes Blvd Suite 510 Kennesaw, GA, 30144

COMENITY BANK/ROOMPLCE PO BOX 182789 COLUMBUS, OH, 43218

WEBBANK/FINGERHUT 7075 Flying Cloud Dr Eden Prairie, MN, 55344

MERRICK BANK CORP One Paces West Suite 1400 Atlanta, GA, 30339

PERSONAL FINANCE/MARIN 8211 TOWN CENTER DR BALTIMORE, MD, 21236

ARS ACCOUNT RESOLUTION PO BOX 459079 Fort Lauderdale, FL, 33345

SYNCB/WALMART Po Box 530927 Atlanta, GA, 30353 ALIGNCUMULUS 325 W Huron St #300 Chicago, IL, 60654

PENN CREDIT CORPORATIO 916 S 14TH ST HARRISBURG, PA, 17104

Americash - Bankruptcy 880 Lee Street Suite 302 Des Plaines, IL, 60016

Credit Box.com, LLC 2400 E Devon Ave Ste 300 Des Plaines, IL, 60018

Big Picture Loans E23970 Pow Wow Tribal Watersmeet, MI, 49969

MaxLend P.O Box 639 Parshall, ND, 58770

Green Arrow Loans 64 Elbern Avenue Rutland, VT, 05701

Rapital Capital PO Box 168 Des Plaines, IL, 60016

Total Loan Company, LLC 2174 Gladstone Ct Glendale Heights, IL, 60139

City of Chicago Parking Tickets 333 South State Street, Rm 540 Chicago, IL, 60604

Money Lion LLC 501 5th Ave New York, NY, 10017 Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 66 of 74

Middle Name estions for Reporting Purpose	Last Name								
estions for Reporting Purpose									
		Part 6: Answer These Questions for Reporting Purposes  16. Whet kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as							
"incurred by an individual No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primaril money for a business or  No. Go to line 16c.  Yes. Go to line 17.	al primarily for a pers by business debts? E investment or throug	ional, family, or nousend Business debts are debts gh the operation of the b	that you incurred to obtain business or investment.						
Ves Lom filing under Chante	er 7. Do vou estimate ti	hat after any exempt prope to distribute to unsecured	Creditors						
✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	5,001-10	0,000	25,001-50,000 50,001-100,000 More than 100,000						
\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000 \$50,000 \$100,00	,001-\$50 million ,001-\$100 million 0,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion						
\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000 \$50,000	,001-\$50 million ,001-\$100 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion						
			a information provided is true and						
correct.  If I have chosen to file under Cof title 11, United States Code under Chapter 7.  If no attorney represents me a out this document, I have obtour I request relief in accordance of Understand making a false state connection with a bankruptcy both. 18 U.S.C. §§ 152, 1341  **  /s/ Antonio St. Hilaire Signature of Debtor 1	Chapter 7, I am aware e. I understand the re and I did not pay or a ained and read the ne with the chapter of titatement, concealing a case can result in firm, 1519, and 3571.	e that I may proceed, if elelief available under each gree to pay someone who tice required by 11 U.S tte 11, United States Corproperty, or obtaining mes up to \$250,000, or in Signature of De	igible, under Chapter 7, 11,12, or 13 chapter, and I choose to proceed o is not an attorney to help me fill .C. § 342(b). de, specified in this petition. noney or property by fraud in mprisonment for up to 20 years, or						
	"incurred by an individual No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primaril money for a business or No. Go to line 16c.  Yes. Go to line 17.  16c. State the type of debts your	No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily business debts? Emoney for a business or investment or throu No. Go to line 16c.  Yes. Go to line 17.  16c. State the type of debts you owe that are not  No. I am not filing under Chapter 7. Go to line 18.  Yes. I am filing under Chapter 7. Do you estimate the expenses are paid that funds will be available.  No.  Yes.  Yes.  Yes.  1,000-5, 50-99  100-199  200-999  \$0-\$50,000  \$1,000,00  \$50,001-\$100,000  \$100,001-\$500,000  \$50,000  \$50,001-\$1 million  \$100,001  \$50,000  \$100,001-\$500,000  \$100,001-\$500,000  \$100,001-\$500,000  \$100,001-\$100,000  \$100,001-\$500,000  \$100,001-\$100,000  \$100,001-\$100,000  \$100,001-\$100,000  \$100,001-\$100,000  \$100,001-\$100,000  \$100,001-\$100,000  \$100,001-\$100,000  \$100,001-\$100,000  \$100,001-\$100,000  \$100,001-\$100,000  \$10	"Incurrectly an individual primarily for a personal, family, or nousend No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily business debts? Business debts are debts money for a business or investment or through the operation of the business of the line 17.  16c. State the type of debts you owe that are not consumer debts or business are paid that funds will be available to distribute to unsecured expenses are paid that funds will be available to distribute to unsecured No.  Yes.  Yes.  1.000-5,000  1.000-199  1.000-5,000  1.000-199  1.000-199  1.000-199  1.000-199  1.000-199  1.000-199  1.000-199  1.000-199  1.000,001-\$10 million  \$50,0001-\$10 million  \$50,0001-\$10 million  \$50,0001-\$10 million  \$50,000.01-\$10 million  \$50,000.01-\$10 million  \$50,000.01-\$10 million  1.000,001-\$50 million  1.000,001-\$50 million  1.000,001-\$50 million  1.000,001-\$50 million  1.000,001-\$50 million  1.000,001-\$50 million  1.000,001-\$50 million  1.000,001-\$50 million  1.000,001-\$50 million  1.000,001-\$50 million  1.000,001-\$50 million  1.000,001-\$50 million  1.000,001-\$10 million  1.000,001-\$10 million  1.000,001-\$10 million  1.000,001-\$10 million  1.000,001-\$10 million  1.000,001-\$10 million  1.000,001-\$10 million  1.000,001-\$10 million  1.000,001-\$10 million  1.000,001-\$10 million  1.000,001-\$10 million  1.000,001-\$10 million  1.000,001-\$10 million  1.000,001-\$10 million  1.000,001-\$10 million  1.000,001-\$10 million  1.000,001-\$10 million						

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 67 of 74

Fill in this infor	mation to identify your c	ase:				
Debtor 1	Antonio		St. Hilaire			
Debio. 1	First Name	Middle Name	Last Nam	e		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Nam	ie		
	Bankruptcy Court for the:	Northern	District of Illino			
Case number						
(If known)					_	Check if this is a amended filing
Official	Form 106De	<u>;C</u>				
_ Declarat	ion About an	Individual Del	btor's Sch	edules		12/1
U.S.C. §§ 152,	1341, 1519, and 3571.				,000, or imprisonment for up to 20 y	
✓ No	Name of person	eone who is NOT an atto	Attach I		n Preparer's Notice, Declaration, and	
that they	nalty of perjury, I declar are true and correct. nio St. Hilaire	re that I have read the s		edules filed with t		

MM/DD/YYYY

Date 3/20/2018

MM/DD/YYYY

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 68 of 74

Dobtor	1 Antonio		St. Hilaire	Case number (if known)
Deptor	First Name	Middle Name	Last Name	
28. W	Vithin 2 years before you reditors, or other parties No Yes, Fill in the details	<b>98.</b>	ou give a financial statem  Date issued	ent to anyone about your business? Include all financial institutions,
			Date Issaud	
	Name		MM/DD/YYYY	-
	Number Street		_	
	City	State Zip Code	_	
Part 1	2: Sign Below			
l ha tru a b	e and correct. I unders ankruptcy case can red	tonio St. Hilaire	atement, concealing prop or imprisonment for up to	nents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	5 . 60	0/0010		Date
Dic	Date 3/2 I you attach additional		f Financial Affairs for Indiv	iduals Filing for Bankruptcy (Official Form 107)?
	No Yes			
Dic	d you pay or agree to pa	y someone who is not an a	ttorney to help you fill out	bankruptcy forms?
<b>▽</b>	No Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).



# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 69 of 74

btor Antonio		St. Hilaire	Case number (if
First Name	Middle Name	Last Name	known)
t 2: List Your Unexpired	Personal Property Leas	es	40CC) (III in the
r any unexpired personal pro ormation below. Do not list r sume an unexpired personal			Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Describe your unexpired po	ersonal property leases		Will the lease be assumed?  ☐ No
Lessor's name:			Yes
Description of leased property:			
Lessor's name:			□ No □ Yes
Description of leased property:			
Lessor's name:			□ No □ Yes
Description of leased property:			
Lessor's name:			□ No □ Yes
Description of leased property:			
Lessor's name:			No Yes
Description of leased property:			
Lessor's name:			No Yes
Description of leased property:			
Lessor's name:			□ No □ Yes
Description of leased property:			
3: Sign Below			
Under penalty of perjury, I o property that is subject to a	leclare that I have indicated an unexpired lease.	I my intention about any	property of my estate that secures a debt and any personal
/s/ Antonio St. Hilaire Signature of Debtor 1	Anth	_ <b>*</b> Sig	nature of Debtor 2
Date 3/20/2018 MM/DD/YYYY		Da	te MM/DD/YYYY

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 70 of 74

# UNITED STATES BANKRUPTCY COURT Northern District of Illinois

in re:	St. Hilaire, Antonio	Case No	
_	Debtor(s)		
		Chapter.	Chapter7
	VERIFICATI	ON OF CREDITOR MATE	IIX
knowle	The above named Debtors hereby verify that edge.	the attached list of creditors is true	and correct to the best of their
Date:	3/20/2018	/s/ St. Hilaire, Antor St. Hilaire, Antonio Signature of Debto	10 4

# Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 71 of 74

Debtor 1 Antonio		St. Hilaire	Case number (if kno	own)	
First Name	Middle Name	Last Name		Column B	
			Column A  Debtor 1	Column B Debtor 2 or	
				non-filing spouse	
8.Unemployment compens	ation		\$ <u>0.00</u>		_
Do not enter the amount if	you contend that the amounts. Instead, list it here:	nt received was a benefit ↓	<del></del>		
	ot. Install, not it have	\$0.00			
For your angues		\$0.00			
For your spouse					
9.Pension or retirement independent under the Social Se	curity Act.		\$ <u>0.00</u>		-
maumonto roccivad as a vic	y benefits received under the tim of a war crime, a crime a prorism. If necessary, list ot	e Social Security Act of			
	<del></del> _				-
Total amounts from separa	te names if any		+\$0.00	+	
rotaramounts nom separa	no pages, ii airy.				≠    /
11. Calculate your total cu	rrent monthly income. Ad	d lines 2 through 10 for	\$ <u>3,036.99</u>	·	- \$3,036.99
each column. Then add the to	tal for Column A to the tota	l for Column B.			ــــــــــــــــــــــــــــــــــــــ
					Total current
					monthly income
Part 2: Determine Whet	her the Means Test Ap	plies to You			
2. Calculate your current r					
12a Copy your total currer	nt monthly income from line	11.	Сору	/ line 11 here →	\$3,036.99
			•••••		X 12
	umber of months in a year).			12	<del></del>
12b. The result is your ann	ual income for this part of t	he torm.			\$50,440.00
3 Calculate the median far	nily income that applies t	o you, Follow these steps:			
	. the	\ \ Illinois			i
Fill in the state in which yo	u live.				ì
Fill in the number of people	e in your household.	2			, <b>3</b>
	come for your state and size	of	The substitution of the su	1	3. <u>\$67,254.00</u>
household.	nedian income amounts, de	online using the link specified	d in the separate		
instructions for this form. T	his list may also be availabl	e at the bankruptcy clerk's office	ce.		
4. How do the lines compa					
14a. Line 12b is less t Go to Part 3.	han or equal to line 13. On	the top of page 1, check box 1	I, There is no presumption o	f abuse.	
14b. Line 12b is more Go to Part 3 and	than line 13. On the top of fill out Form 122A-2.	page 1, check box 2, The pre	sumption of abuse is determ	ined by Form 122A-2.	
Part 3: Sign Below					
ant or					
		t the information on this states	ment and in any attachments	is true and correct.	
By signing here, I declare	under penalty of perjury tha	t the information on this stater	Herit and in any attachment		
	1				
	#61/				
🗶 /s/ Antonio St. Hila	ire	*_			<del></del>
Signature of Debtor 1	7	8	Signature of Debtor 2		
	V		D-4- 0/00/0019		
		Г			
Date 3/20/2018		С	Date 3/20/2018 MM/DD/YYYY		
Date 3/20/2018 MM/DD/YYYY		C			
MM/DD/YYYY	, do NOT fill out or file Form				

Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 72 of 74

B2030 (Form 2030) (12/15)

### UNITED STATES BANKRUPTCY COURT

#### Northam District of Illinois

		Northern District of Illinoi	IS	
In re	Antonio St. Hilaire		Case No.	
	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF COM	MPENSATION OF A	TTORNEY F	OR DEBTOR
	ursuant to 11 U.S.C. § 329(a) and Fed. Bar ompensation paid to me within one year be endered or to be rendered on behalf of the o	afore the filing of the petition in ba	nkruptev, or agreed id	De paru to me, for services
F	or legal services, I have agreed to accept			\$1,750.00
Р	rior to the filing of this statement I have rec	ceived		\$0.00
	alance Due			\$1,750.00
2 TI	he source of the compensation paid to me	was:		
2	· Debtor	Other (specify)		
3. TI	ne source of the compensation paid to me	is:		
	Debtor	Other (specify)		
4.	I have not agreed to share the above-dismembers and associates of my law firm.	sclosed compensation with any otl	her person unless the	y are
	I have agreed to share the above-disclosmembers or associates of my law firm. At the people sharing in the compensation	A copy of the agreement, together $^\circ$	son or persons who a with a list of the name	are not es of
5. In	return for the above-disclosed fee, I have	agreed to render legal service for a	II aspects of the bank	ruptcy case, including:
	<ul> <li>a. Analysis of the debtor's financial situ bankruptcy;</li> </ul>	uation, and rendering advice to the	debtor in determining	g whether to file a petition in
	b. Preparation and filing of any petition	, schedules, statements of affairs	and plan which may b	e required;
	c. Representation of the debtor at the n	neeting of creditors and confirmati	ion hearing, and any a	djourned hearings thereof;
6. By	y agreement with the debtor(s), the above-	disclosed fee does not include the	following services:	
		CERTIFICATION		
l ce debtor(s	rtify that the foregoing is a complete stater s) in this bankruptcy proceedings.	ment of any agreement or arrangen	nent for payment to m	ne for representation of the
,	3/20/2018	/s/ (	Corey A. Walters	
	Date		ature of Attorney	
		Se	mrad Law Firm	
		N <sub>2</sub>	ame of law firm	



# CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1750.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$31.00

Motion to Reopen and Avoid Lien \$1000.00

Motion to Reopen \$350.00 + court costs

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.



Case 18-08075 Doc 1 Filed 03/20/18 Entered 03/20/18 17:20:33 Desc Main Document Page 74 of 74

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 03/20/2018

Client

Client \_\_\_\_\_\_

Attorney